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ORIGINAL COMMUNICATIONS



THE PROGRESS OF WOMEN IN MODERN GREECE *

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New York

[Dr. Achilles Rose is known as an ardent Phil-Hellene who has made interesting and valuable contributions to the study of Greek life and civilization. While a profound admirer of ancient Greek literature, he is deeply interested in the development of modern Greece, its life, language, and institutions. His book, "Christian Greece, Living Greek," has won many commendations from reviewers. In this article he speaks with personal and professional authority.—S. J. B.]

KALOS, in Greek, was once the word for beautiful; but since the ancient Greeks thought that everything beautiful was good, this word, kalos, became a synonym for beautiful and good.

In the sense that beautiful and good are one and the same, the greatest philosopher of modern times, Emmanuel Kant, has spoken of woman as the representative of beauty; and in this sense I shall speak of the women of Greece of to-day as the ideals of beauty.

It was a brilliant, a joyful day when, in the year 1886, the Arsakeion of Athens celebrated the fiftieth anniversary of its existence. It was a feast worthy of the Hellenic nation, the most memorable since Greece had regained her independence, a feast which reminded the present generation of the noble spirit and the virtue of their ancestors of recent time.

When a part—a part only—of Greece had regained freedom, after having suffered for almost four hundred years in Turkish slavery, one

* Lecture delivered April 18, 1901, before the Alumnae Association of the New York Training-School for Nurses attached to Bellevue Hospital, New York.

of the first things to which the people devoted their attention was public instruction.

John Kokonis, a prominent pedagogue, held the opinion that the state of civilization, and the power of a nation before all, were dependent on the influence of the mothers upon their children, because the children received their first education from the mother, and because the influence of mothers in society produced great and good results; further, he held that the position of woman was one of the most important indications by which the national character and the state of civilization of a people could be judged. For these reasons Kokonis proclaimed that in Greece, where higher schools for boys had already been established, higher schools for girls were needed immediately, because it would be unjust to deny to women the same standard of education which was accorded to men.

The income of the Greek government at that time was so small that funds for such schools could not be expected from this quarter.

The little Greek nation had made tremendous sacrifices during a war of seven years, had fought until her land had been devastated and her race decimated. The sword, famine, and disease had reduced the population to about one-third of its original number, and this third to a state of most complete destitution. There has been no war in modern times in which an equal loss of property and life has been sustained by any people, who, despite this suffering, have remained unsubdued. From 1825 to 1832 Greece was deprived of all internal revenue. Her commerce was completely annihilated. Even with the immense supplies which Greece received from the Philhellenic Committees of Europe and America, the revolution seemed not infrequently to be in danger of collapse from actual starvation of the whole population. All agricultural stock was extirpated; houses, barns, and stables were destroyed; fruit-trees and vineyards rooted up.

It was shortly after this cruel war had ended that, at the instigation of Kokonis, there came together in Athens, on July 25, 1836, seventy-two men, whose purpose was to found an institution in which girls should be educated to teach in schools throughout Greece, even in the out-of-the-way villages.

The money to execute this plan was raised by public subscription. The appeal, directed to the love of the Greeks for knowledge, was received with joy alike in the palace of the king, the houses of the rich, the cell of the monk, and the hut of the peasant,—indeed, by all Greeks; those in the liberated fatherland, those who still suffered in Turkish bondage, the Greeks living in foreign lands—all gave according to their ability.

The constitution of this Educational Society, as it was called at

first, forms a bright page in the history of Greece, and has proved a blessing not only for the little Greek kingdom, but wherever Greek hearts are beating, wherever the Greek language is spoken.

What success the Educational Society has had can be seen from the words of a French writer, published about twenty years ago: "There no more exists a mountain without a valley than a Greek village without a school."

In the first school year, the year 1837, the society commenced its work with a capital of five thousand drachmas;* in the year 1886 it had a budget of three hundred thousand drachmas. During the first school year the number of pupils, boarding and day scholars together, was seventy; in the year 1886 it had risen to two thousand.

For the first three years a house was rented, every succeeding year a larger one; and when, after the third year, there was no house in Athens large enough to accommodate the now much increased number of pupils, the erection of a school building was decided upon.

The society kept on building so long as the means lasted. The timber was presented by Greeks in Roumania, and a ship of the Greek government brought it to Athens. When the funds were exhausted and the society had to discontinue the work of erecting the school-house there appeared on the scene a man who provided the means to finish the house. This man was a physician and a philanthropist. His name was Apostolis Arsakis, and he was of Epirus, a part of Greece which to the present day is suffering under Turkish bondage.

The idea promulgated by Kokonis, that the education of woman is essential for the development and the happiness of a nation, found an echo in his soul. He gave two hundred and fifty thousand drachmas to finish the school-house, and paid back to the Educational Society all the money it had already expended on the building, namely, one hundred thousand drachmas. Thus he alone paid for the whole structure. Then he deposited two hundred thousand drachmas in the National Bank of Greece, with the condition that the interest of this capital should be applied towards maintaining the school.

When the house was finished the Educational Society decided that the institution should for all time bear the name of Arsakis, and the word *Arsakeion* was written in golden letters on a white marble tablet placed over the large entrance—as you see it on the picture. He also gave funds for a school for girls in Epirus, a school to be under the control of the *Arsakeion*.

Not only Arsakis, but many others, have contributed to enrich the institution. The names of those who have given most generously are

* A drachma is about twenty cents.

written on marble columns which stand in the large hall of the entrance. Here we read the name of the philanthropic Helene Tositza, who provided for a department of the school which bears her name; of the illustrious Pana, who provided for a department for the small children, a department which corresponds with our kindergarten; of the noble Lady Sina; here we find also the names of Philhellenes,—Canning, Eynard, and the Duke of Montpensier.

During the first fifty years of its existence more than two thousand teachers have received their diplomas in the Arsakeion, and they have taught and teach in every city and every village of Greece, and in many places in the Orient where Greeks are living, as well as in French and in English cities.

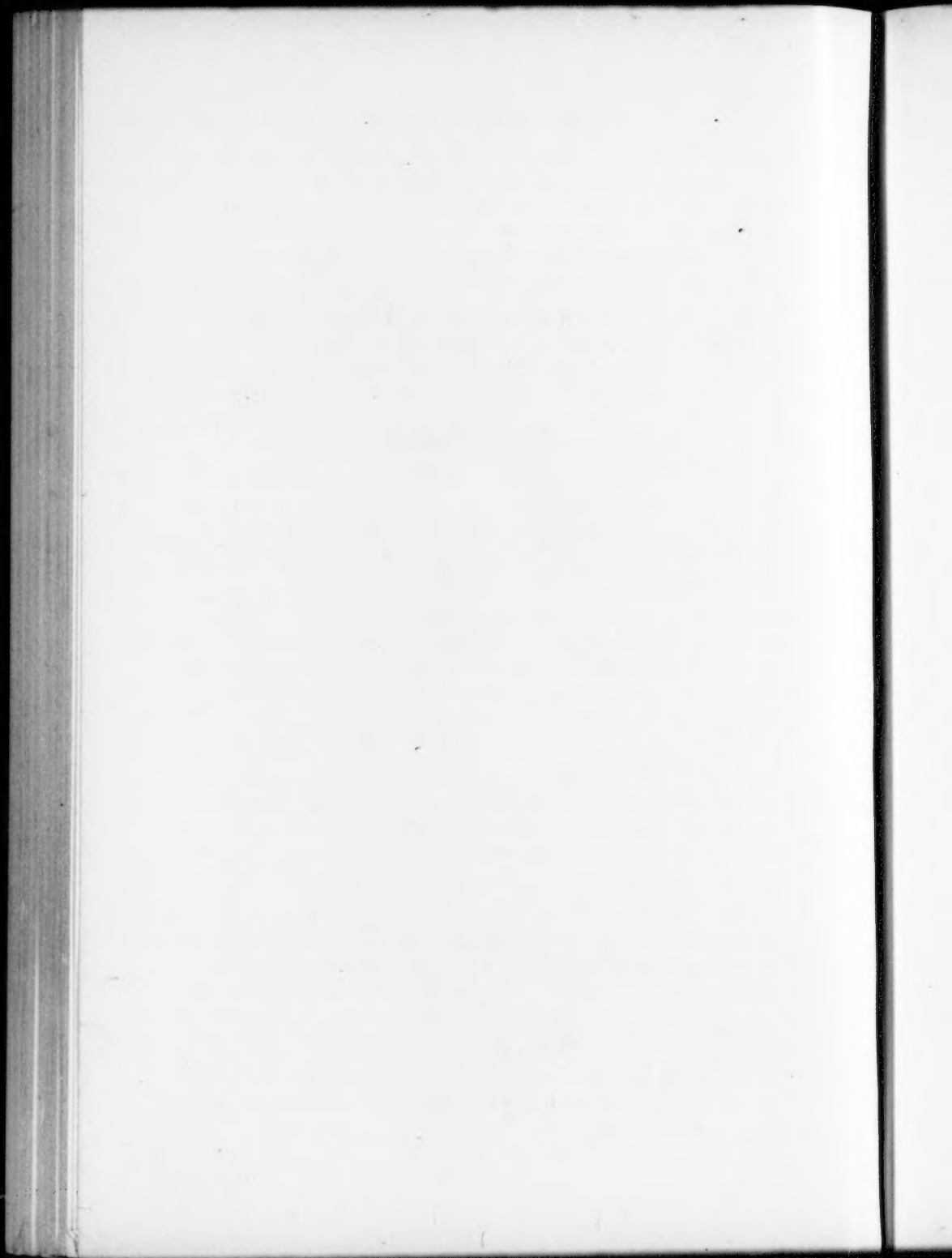
Each time that I go to Athens, and every day while I am there, I find something that is noble and beautiful of which none of the visitors before me has written. I have spent hours in our Astor Library examining the magazines, but in none have I found the Arsakeion mentioned.

Now I shall speak of another institution which I am certain will excite your interest not less than the Arsakeion, and whoever of you may have the good fortune to see Athens will be prepared by this modest description to visit the Evangelismos.

Until the year 1884 Athens had only one hospital, namely, the Municipal Hospital, called Elpis (Hope). In the year 1872 there was organized, under the inspiration and protection of Her Majesty the Queen, the Gynaikias Paideuseos Syllogos, which is a society for the improvement of the education of women. The Ergastirion of this society is the great workshop for artistic handwork. Over four hundred industrious women find steady occupation here. It is not a factory owned by some mercantile firm, but the workshop of the society, founded and sustained in the interest and for the benefit of Greek women of the working class. Silk fabrics are woven there that surpass the best French work; some of them, interwoven with gold thread, are finer than can be found anywhere else. There are head-dresses, veils, and bridal garments so fine that several yards of them can be placed in a nutshell. The women work in airy and bright rooms with high ceilings, the windows open, and the workers are not under the control of a foreman, but work under the instruction and guidance of motherly friends, aristocratic ladies of Athens. All is handwork, nothing machine-made. Here we have original Oriental patterns in carpets, and these carpets are superior to any carpets made in America; they are taken to the river at Easter-time and washed in the water without injury to the color. There are undergarments, solid, durable, and artistic. The aristocratic families in Athens have found how much more beautiful the Greek work is than that bought



OLGA, QUEEN OF THE HELLENES



in Paris, and it has become fashionable among ladies of the higher circles to have their trousseaux made in the Ergastirion of the Society for Education of Women in Athens, instead of ordering them, as was done formerly, from Paris.

This Ergastirion is the centre for women's work throughout Greece. Gold embroideries on silk and velvet, such as are made in Eubœa, in Epirus, and in some of the islands of the Ægean Sea, and sent to the Ergastirion in Athens, are products of a taste that has been evolved and transmitted through centuries; their equals cannot be found in any Parisian shop. From the Ergastirion in Athens the peasant women in the provinces are supplied with artistic patterns, their taste is educated and its purity maintained, and of all kinds and on many subjects advice is given by the ladies of Athens to the women in the country who work for the Ergastirion.

Among the objects of this society from its start has been that of elevating the status of women nurses to one of dignity, which previously had not been accorded the profession. Nursing the sick as an occupation was practised by women of the humblest classes, and the status of such women was considered no higher than that of washerwomen or women going out to do house-cleaning; there existed at that time among the ordinary people no idea that nursing the sick was a noble vocation, worthy of well-educated, well-trained women.

In the year 1875 the Queen requested Dr. Nicolas G. Makkas to write a text-book for the instruction of nurses. This book of one hundred and seventy-six pages was published in the same year. The first chapter treats of the virtues and the utility of nurses. In the year 1876 the Queen appointed a committee of distinguished men, presided over by the Metropolitan of Athens, to collect money for the erection of a hospital. This committee succeeded in securing the necessary funds, and in the year 1881 the foundation of the new hospital, to be named Evangelismos, was laid, and in the year 1884 the building was dedicated. To give an account of the contributions made by philanthropic citizens of Athens, of Greeks living in foreign lands, and of English and Russian Philhellenes would fill pages, because, as everyone has given generously, according to his means, justice would require that I should enumerate a great many, not only those who gave a million, or even millions, but also the great number of those who subscribed five thousand or ten thousand drachmas. The same may be said of prominent Athenian ladies who are aiding in this work of charity. I saw a committee of these ladies who devote time and labor to the Evangelismos, presided over by Madame Sungros, while in session. One wing of the magnificent building bears the name Sungros, another the name Theodoridis. These wings were

named after the two great philanthropists who paid the entire cost of their erection.

It is to some extent due to the warm interest and the personal devotion of the Queen to this hospital that the contributions from the beginning came in so richly and continued to flow all the time, but the truth is that there exists no place on earth, no city in the world, which is, in proportion to its size, so generous as Athens in the matter of philanthropy. The Athenians have quite a number of men who may well be compared with our own Peter Cooper, men who gave their millions, not as legacies, but while alive.

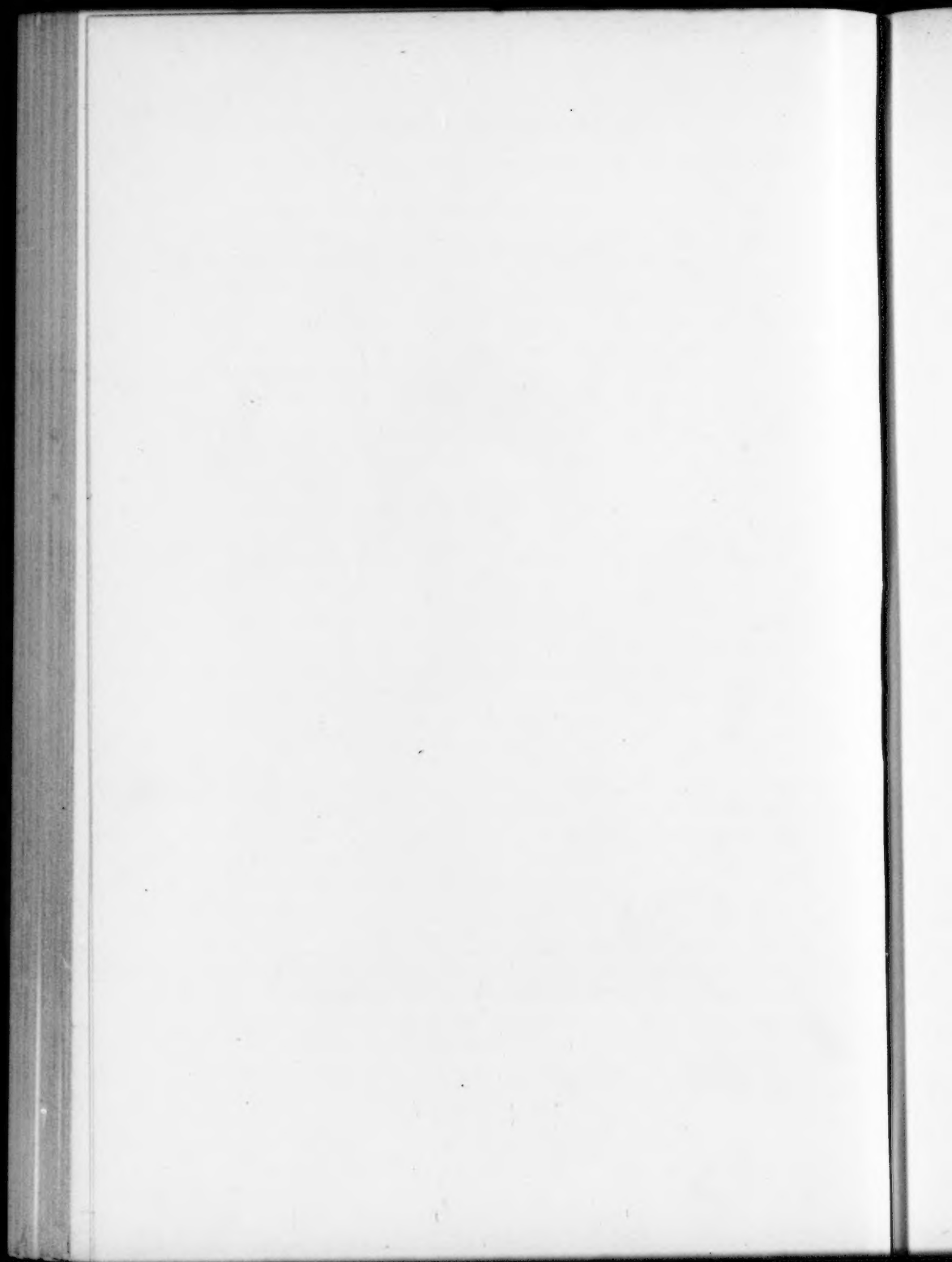
In the first year (1884--5) the number of sick treated was three hundred and one. In the year ending March, 1900, the number was nineteen hundred and ninety-nine. Of these twelve hundred and ninety were medical and seven hundred and nine surgical cases. The expense in this last year was two hundred and thirty-two thousand three hundred and thirty-three drachmas. The last report records a legacy of Andrew D. Sungros of two million drachmas.

In speaking of the site it is impossible to exaggerate, for the Evangelismos is the most wholesome, the most beautifully situated hospital in the world. It stands on high ground, with a magnificent view upon a scene dominated by the picturesque Agios Georgios. There is a current of air from the mountains of the north which secures freshness even at noon during the summer-time. These breezes from the north, which were much prized by the ancient Greeks, are most salubrious for Athens. It is on account of this fresh mountain air, modified sometimes by sea-breezes, that the Americans and the English have selected the places for their archæological schools in the neighborhood of the Evangelismos. It is well known that on account of the purity of the air in Greece, especially in Athens, septic diseases are of extremely rare occurrence. The hospital is so well regulated that even patients of the higher class come to it for treatment.

As has been mentioned already, it is the Queen who inspired and still inspires and protects the work; but, unlike instances of this kind, in which patronage by a high personage means not much more than giving the name, receiving reports, and contributing money, we have here an example of devotion without equal. The interest which the Queen takes in the welfare of the hospital is admirable indeed. While in Athens she takes personal notice of most minute details, visits the hospital daily, goes to a bedside to console the suffering sick like an angel, and is alike kind to the better educated and the most humble. It has happened that the Queen herself has procured and brought articles of different descriptions that patients had been longing for.



A GREEK LADY



It is well known that the Queen, unlike some other crowned women of Europe, never enters into politics, but devotes her life exclusively to her family and to works of charity. Her charitable interest, however, is not confined to the noble institutions for the improvement of the condition of women of the working-class and the Evangelismos, in which two institutions she is the ever-active, the leading spirit, controlling the very details, so that nothing is done without her knowledge and approval; she is even known to visit incognito the sick poor in the city of Athens.

The two physicians who took charge of the two departments, Dr. Makkas, of the internal, and Dr. Galvani, of the surgical, when the hospital was opened have been and are still the heads of these departments, are still the physicians in charge of the Evangelismos.

It is difficult to understand why communications from visitors to Greece are as a rule unfavorable to this unfortunate country. If it is true, if you agree with the idea that the position of woman is one of the most important signs of the character of a nation and of its civilization, you must surely confess that the Greeks merit our esteem in a marvellous degree.

Once I had the honor to address a select American society on my friends the Greeks. Among the audience were a number of professors of the Columbia University of this city, and one of them who had lived for a long time in Greece said in the course of the discussion, "There exists no people among whom woman is more highly esteemed than the Greeks of to-day, and this fact alone augurs for the nation a happy future."

THE INTERNATIONAL COUNCIL OF NURSES

A MESSAGE FROM ITS PRESIDENT

THE INSPIRATION

A WELL-DEVELOPED sense of corporate responsibility in individuals is the only sure foundation on which to build the liberties of peoples. Failure on the part of powers to cultivate the sacred sense of human responsibility has resulted in the enslavement of persons and in the degradation of nations. Hence honor, the height, the flower, the cornerstone of morality, must be the inspiration of individual conduct and the fount from which true greatness springs. The people must have knowledge to make them strong and worthy of power, and to make a human

named after the two great philanthropists who paid the entire cost of their erection.

You cannot take a human being and clothe and feed it as you would a doll, and expect aught but an echo should you tap its brain, or an outflow of dry dust whence the red blood-corpuscles should spurt. Government by animal force develops cunning, as opposed to courage, in the weak as a means of self-preservation: and yet it is the heroic virtues which must be sought after and exercised by those who hope to rise and to enjoy in all its fulness the strenuous life.

And yet virtues, to remain heroic, must be held together by the supple, rose-red ribbon of sympathy.

And fellow-feeling leads to concerted action, which forges the golden links of that international chain which will in future ages bind the peoples of the earth together, and by which they may ascend unto the everlasting hills.

THE INTERNATIONAL IDEA

567 The rapid march of science, and its great outcome of ever-widening enlightenment and ever-contracting ignorance, must render it more and more impossible as time goes on for the different nations of the world to remain in racial antagonism, or continue to be inspired by the pride of assumed supremacy. Indeed, there are even now signs in many directions of a desire that international friendship and mutual appreciation shall supplant the distrust and discord begotten of ignorance and greed. And with this aspiration stirring in the hearts of the worker, the philosopher, and the children of science, what could be more natural than that the women of all nations whose earthly work has to do with healing should aspire to forge a link in this fine chain of fellowship which shall bind together for mutual well-being the peoples of the world? Then the insignia of brute force will be obsolete, and united humanity will march forward to victory under the banner of knowledge.

There is nothing heroic or commendable in the isolation of nations. Such isolation is necessarily injurious to the national growth and intellectual expansion, and can only tend to the advantage of privileged classes of persons, maintained in idleness by the ignorance of what are termed in Europe "the lower orders."

Great Britain is notorious for its insular prejudices, but free intercourse with its progressive, self-governing colonies and with the Americas may prove its salvation. We workers are beginning to voice the necessity for space and light and to claim the right to live and move and have our being, and, moreover, to realize that the round world and all that dwell therein are but infinitesimal atoms in the universal whole.

THE TONGUES OF MEN AND ANGELS

It was in 1893 that I had the privilege of attending in Chicago the meeting of the International Council of Women, and of hearing the "International Idea" sympathetically and beautifully explained by Mrs. May Wright-Sewall. I was a charmed listener, and grasped the meaning of her inspired oration, the text of which is to be found in the preamble of the constitution of the Council: "Sincerely believing that the best good of humanity will be advanced by greater unity of thought, sympathy, and purpose, we hereby bind ourselves together in a confederation of workers committed to the overthrow of all forms of ignorance and injustice, and to the application of the Golden Rule to society, law, and custom." Thus is the seed sown. What more natural than that trained nurses—a mighty army of workers ever increasing in civilized lands—should bind themselves together in a confederation for the application of the Golden Rule? Here in our exclusive little islands, governed by hereditary legislators, and where the idolatry of the Golden Calf scarifies poverty with a relentless knout, what chance of professional self-government can there be for the unenfranchised woman worker? What wonder then that British nurses under existing conditions should turn with hope to their colleagues in other and more favored lands and invite the help and strength to be gained from international union?

The idea of an International Association of Nurses appealed strongly to me. It proved to be acceptable to others, and the opportune moment for suggesting its formation arrived when the International Council of Women held its quinquennial meeting in London in 1899, and when Mrs. Sewall—the incarnation of the international idea—was in our midst. Representative nurses from America and other countries were also in London, and at the Matrons' Council Conference held during the Congress week I had a unique opportunity of suggesting a scheme for the formation of an International Council of Nurses in the following words: "I desire to bring before this meeting a question which I believe to be of international interest and importance. The nursing profession, above all things at present, requires organization; nurses, above all other things, at present require to be united. The value of their work to the sick is acknowledged at the present day by the government of this and of all other civilized countries, but it depends upon nurses individually and collectively to make their work of the utmost possible usefulness to the sick, and this can only be accomplished if their education is based on such broad lines that the term 'a trained nurse' shall be equivalent to that of a person who has received such an efficient training and has also proved to be so trustworthy that the

responsible duties which she must undertake will be performed to the utmost benefit of those entrusted to her charge. To secure these results two things are essential: that there should be recognized systems of nursing education and of control over the nursing profession. The experience of the past has proved that these results can never be obtained by any profession unless it is united in its demands for the necessary reform, as by union alone can the necessary strength be obtained. This union has been commenced in this country and in the United States. It remains for the nurses of other lands to follow our example and unite amongst themselves; but I venture to contend that the work of nursing is one of humanity all the world over, and it is one, therefore, which appeals to women of every land without distinction of class or degree or nationality. If the poet's dream of the brotherhood of man is ever to be fulfilled, surely a sisterhood of nurses is an international idea, and one in which the women of all nations, therefore, could be asked and expected to join. The work in which nurses are engaged in other countries is precisely the same as that in our own. The principles of organization would be the same in every country, the need for nursing progress is the same for every people, and my suggestion briefly is, therefore, that we should here and to-day inaugurate an International Council of Nurses, composed of representatives of the nursing councils of every country, a body which shall in the first place help to build up nursing councils in those countries which do not now possess any nursing organization at all, which shall afford to the nurses of all nations opportunities for the interchanging of thought and counsel, the broadening of sympathies, and the abolition of prejudices. I beg, therefore, to propose:

"That steps be taken to organize an International Council of Nurses."

This resolution was seconded from the chair by Miss Isla Stewart, president of the Matrons' Council, supported by Miss Huxley, of Dublin, and Mrs. May Wright-Sewall, and carried unanimously. A Preliminary Committee was appointed, the Council founded, and later, by international selection, the officers were elected.

The constitution as adopted was prefaced by the following preamble:

"We, nurses of all nations, sincerely believing that the best good of our profession will be advanced by greater unity of thought and sympathy of purpose, do hereby band ourselves in a confederation of workers to further the efficient care of the sick, and to secure the honor and the interests of the nursing profession."

The objects were defined as follows:

“(a) To provide a means of communication between the nurses of all nations, and to afford facilities for the interchange of international hospitality.

“(b) To provide opportunities for nurses to meet together from all parts of the world to confer upon questions relating to the welfare of their patients and their profession.”

It is an augury for future success that representative superintendents of nurse training-schools in Great Britain, the United States of America, the Dominion of Canada, the Commonwealth of Australia, New Zealand, Germany, and Holland have already accepted office on the International Council.

THE INTERNATIONAL NURSING TREE

Professions, like nations, can only flourish by the development of the individual sense of corporate responsibility. The first aim, therefore, of the International Council of Nurses is to organize nurses all the world over and make them articulate. Thus in the formation of national councils or federations of nurses *graduate suffrage* must ultimately be adopted as a fundamental principle.

Thus the first and most important work of the International Council will be to confer upon questions relating to the definition of the basis of education and qualifications for a trained nurse. At present no minimum standard of education, examination, or qualification exists upon which a trained nurse can demand legal status.

Rooted, therefore, in the graduate vote, the Nursing Tree will branch by delegation into *alumnæ* associations, blossom by delegation into national associated *alumnæ*, ripen into national councils of nurses inclusive of superintendents' and nursing societies, the ripe fruit of which will be seen in the International Council of Nurses, composed, we hope, in time of the delegates of national councils from every civilized country on the face of the earth.

An ambitious scheme. Why, certainly. Yet it is simple. I like big things. It is easy to predict that great importance will be attached to decisions arrived at by a body of nurses so representative of all shades of nursing opinion as those delegated to act on the International Council. It should ultimately become the deliberative assembly and supreme court of appeal of the nursing world.

THE COMING CONGRESS

It is a happy arrangement that the meetings of the International Council of Nurses are to be held at Buffalo in the same week as the

International Congress. Delegates will be present from Great Britain, Canada, and Federated Australia, besides those in the United States, and we may hope that in addition to the business meetings of the Grand Council others of a less formal nature will be held, so that its objects may be brought before the members of the Congress, and an opportunity afforded for discussing and arousing interest in its future work.

In your "dear land of Liberty" the environment will be eminently sympathetic and encouraging to any phase of the international movement. Au revoir.

ETHEL GORDON FENWICK.

A HISTORY OF THE BUFFALO GENERAL HOSPITAL TRAINING-SCHOOL FOR NURSES *

BY LOIS MASTIN DIEHL

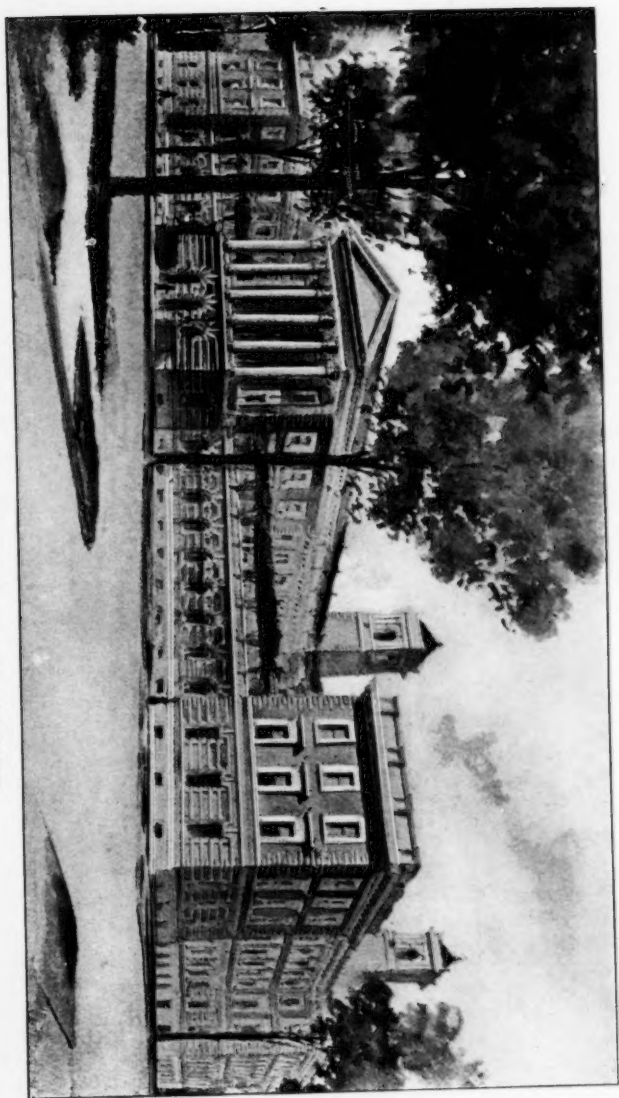
IN giving the history of the Buffalo General Hospital Training-School for Nurses it seems necessary to refer also to some points in the history of the hospital itself, our Training-School not being an independent institution, as are some other schools.

About 1849 the first hospital of Buffalo—that of the Sisters of Charity—was established. The old building is still standing, having been converted into tenements.

In 1855 the need of another hospital was felt, and in December of that year the Buffalo General Hospital was organized. The work evidently progressed slowly, though surely, for it was June 24, 1858, when the building was dedicated with appropriate ceremonies and addresses by ex-President Millard Fillmore, Hon. James Putnam, Mr. Jesse Ketcham, and others.

The original hospital was what is known as the "Old Building." From December 1, 1863, to October 2, 1864, the building was used for a United States Hospital. Dr. D. W. Harrington was one of the soldier patients, afterwards studying medicine. During its use by the United States an outbreak of hospital gangrene occurred which was attended with great fatality. The patients were kept in tents on the grounds when the weather permitted. Dr. John M. Brown, of Westfield, then house physician, relates that, making his rounds through the tents one morning, he found a well-meaning but mistaken lady visitor distributing from her carriage to the patients green cucumbers and other inappropriate delicacies.

* Read before the Alumnae Association January 31, 1901.



BUFFALO GENERAL HOSPITAL, RIGHT DIVISION COMPLETED

The first detached building was a temporary contagious building put up in 1876 and followed by a permanent one in 1877, known as the "Pavilion." It occupied the site of the present Nurses' Home, and consisted of two large rooms with a central hall and small diet-room. The large rooms, or wards, could accommodate six patients each. A nurses' room opened from the east ward.

By 1877 the success of the Nurses' Training-Schools established in 1873 at Bellevue, New Haven, and the Massachusetts General was known and much dissatisfaction was felt with the old methods of nursing. Mrs. John B. Skinner, president of the Ladies' Hospital Association, and Mrs. Thomas F. Rochester, vice-president of the same and wife of an eminent physician, determined to start a new order of things. Without consulting the medical staff or trustees, they engaged Miss Sarah Grey, a graduate of Bellevue, as head nurse for one year. Five pupil nurses were engaged, and so began the first training-school for nurses west of New York City.

The rules of the school were drawn up by Mrs. Skinner and Mrs. Rochester on the plan of those of the New Haven school.

The warden at this time was Mr. J. Y. Bicknell, and the resident physician—there was but one—Dr. Charles G. Stockton, with a medical student as assistant. The daily average of patients during the year was fifty, with a maximum of seventy-one and minimum of thirty. This, though a small number as it seems now, certainly called for hard work from one resident physician and five nurses. The nurses' sleeping-rooms were of necessity located in the basement.

Miss Grey came with the understanding that she was to perform the duties of head nurse only, and declined to give other than practical instruction in the work of nursing. She left at the completion of her year. Her ex-pupil, Mrs. Elizabeth Teal Auld, speaks highly of her ability as a nurse.

Miss Mary Scott (known as Sister Mary, after the English custom), a graduate of Dr. Mack's Training-School at St. Catharines, Ontario, followed Miss Grey November 1, 1878. The original intention was to make nurses' training-schools self-supporting by requiring each pupil nurse to do six months' outside nursing during her second year. The first "outside nursing" in 1878 earned thirty-four dollars.

The "Buffalo General Hospital Report" for 1879 gives the instruction imparted to the nurses as follows: "'The New Haven Hand-Book of Nursing' is used as a text-book, practical lectures are given by the superintendent of nurses, class instruction in Huxley and Yeoman's 'Physiology and Hygiene' by the resident physician, and twenty lectures by the visiting staff."

The medical lectures were arranged by Dr. F. W. Abbott at the petition of the Ladies' Hospital Association, who up to that date had assumed the organization and management of the school. With the arranging for lectures by the staff, a Training-School Committee of the staff was formed of which Dr. F. W. Abbott was permanent chairman. With the exception of two years from July, 1889, to July, 1891, the position was held by Dr. Abbott continuously until his withdrawal in July, 1897. Miss Elizabeth Teal received the first diploma of the school (an engrossed one) on the completion of her two-years' course in 1879.

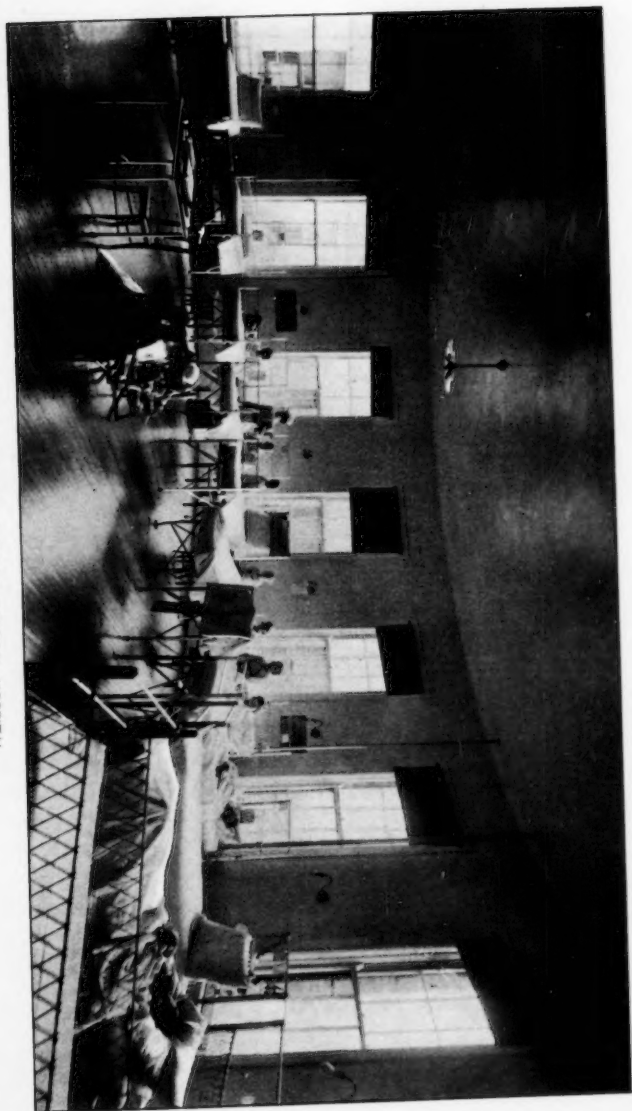
In the light of our present knowledge I wish to quote an extract from the "Buffalo General Hospital Report" of 1879: "While we have had our quota of patients in the medical and surgical wards, there have been only occasional cases of obstetrics, but during the past few months the number has so increased that we have been obliged to use the Pavilion, a detached wooden building originally intended for contagious diseases. This has answered our purpose tolerably well, but at the same time depriving us of its use for cases which of necessity should be isolated."

1880 was a red-letter year of the Buffalo General Hospital. The administration building, familiarly known as the "New Building," and under construction in 1879 and 1880, was opened October 1, 1880. This supplied the additional private rooms and obstetric ward so much needed, and the use of a part of the third floor private rooms, reserved for the warden's family and nurses, permitted an increase in the Training-School, which had been limited for lack of accommodations. The school at this time had thirteen pupils. Sister Mary, after two-years' charge of the school, was succeeded by Miss Cornelia Seeley, of the Boston City and Woman's Hospital, Boston, Massachusetts.

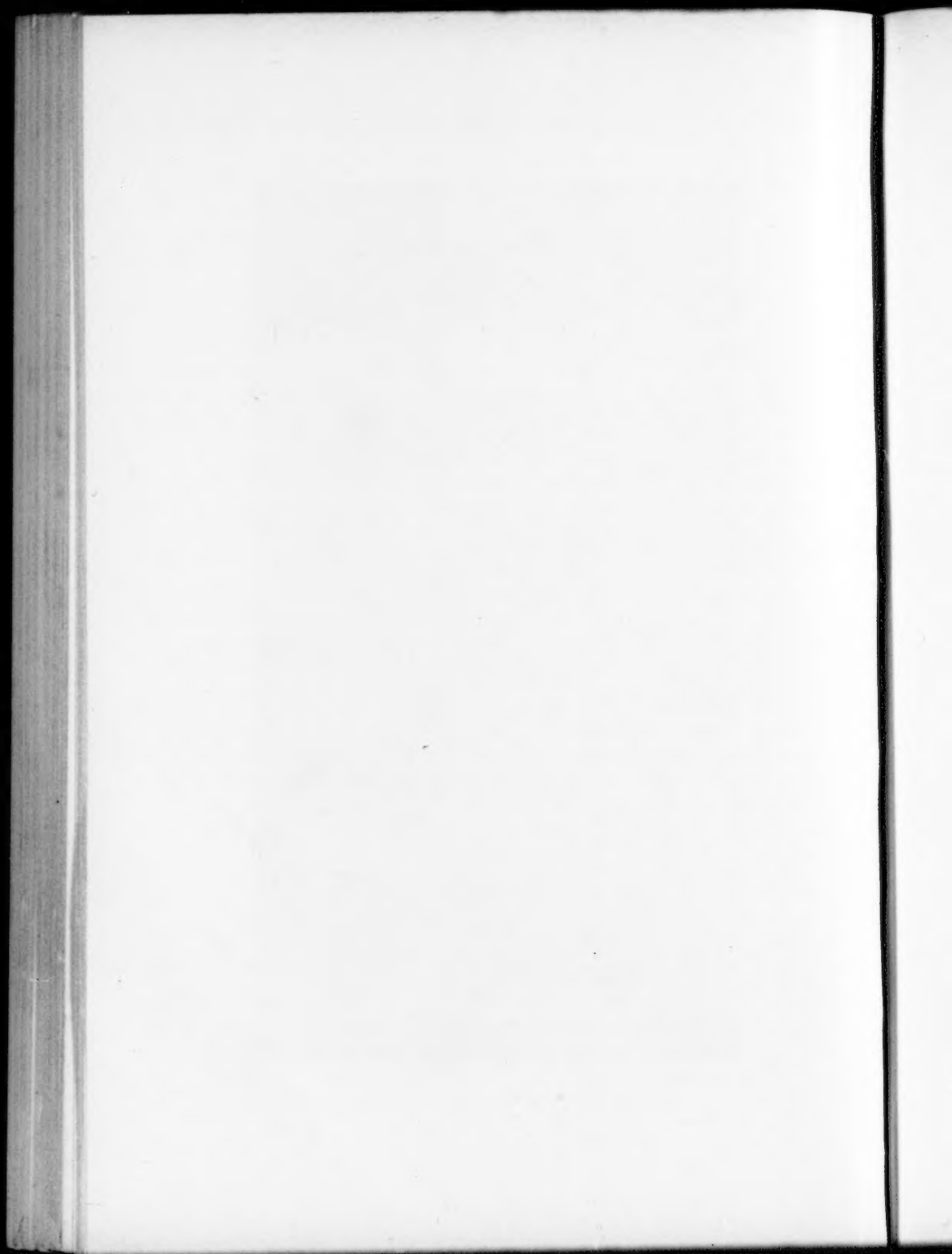
Miss Seeley was a woman with ability and ideas, and the school was by her placed on a firm basis and many improvements were introduced. Among these was the "Nurses' Record Book," originated by Miss Seeley, in which the work and record of each pupil was kept. The Conference Committee was also her idea and was formed in 1880. It consisted of an Advisory Committee to confer with the superintendent of nurses, composed of the president of the Ladies' Hospital Association, the president of the Board of Trustees, and the chairman of the Training-School Committee of the medical staff (Dr. Abbott) as permanent secretary.

In 1881 the resident physician was allowed an assistant, and a diet kitchen was started to give the nurses experience in sick-cookery, each nurse serving as diet nurse for a month.

In 1882 the school numbered sixteen pupils. Examinations are first mentioned in the report for that year, also the application blanks



CIRCULAR WARD, BUFFALO GENERAL HOSPITAL



for candidates. In 1882 also the first graduating exercises were held. In 1883 Dr. Mynter and Dr. Park were appointed surgeons on the staff, and with their coming antiseptic surgery was introduced into the General Hospital. The number of nurses had now reached twenty, again the limit of accommodations. A library for nurses was started, donations of books being made by the staff, and a monthly assessment of ten cents was levied among the nurses for the purchase of new books. In March, 1883, the first death occurred in the Training-School, Miss Emma Kennedy, of the Class of '84, who had been caring for a family with diphtheria, contracted the disease and died after an illness of five days.

In 1884 Mayor Jonathan Scoville made a gift of two thousand dollars for the use of the hospital. It was decided to use it to open a ward for children. After-contributions to the object were so liberal that only a small portion of Mayor Scoville's gift was used. The obstetric ward was converted into a ward for children, now the nurses' dining-room. The remaining money, with an additional gift of three hundred dollars from Mayor Scoville, was used to build a maternity cottage at the northwest corner of the grounds, familiarly known as the "Nursery" and later as "Scoville Cottage."

The children's ward was opened May 13, 1884. August 1, 1884, Miss Seeley resigned to take charge of the City Hospital at Newport, Rhode Island. Her term as superintendent has been the longest in the history of the school, covering about four years. Miss Elizabeth Johnson, a graduate of the New York Hospital, took her place in September, 1884. Mrs. Skinner, one of the founders of the Training-School, died during this year.

Gates Cottage, the donation of Mrs. George B. Gates, was built during the summer of 1885, being opened in the fall. Miss Mary Taylor, of the Class of '85, had the honor of being the first district nurse in Buffalo, being employed soon after her graduation by the First Presbyterian Church for work among the poor. At the end of her year as superintendent Miss Johnson resigned to take up the study of medicine at the University of Buffalo. She was followed as superintendent by her class-mate, Miss Mary K. Howell, who took charge of the school October 1, 1885.

The second death in the school took place in that fall. Miss Jean Rutherford, Class of '86, died of typhoid fever at the end of her first year in school.

In 1886 the Fitch Accident Hospital was opened, and for some time was furnished with supplies and nurses by the General Hospital.

The tents which had been used in hot weather for the men's surgical ward were abandoned after the autumn of 1886. They were placed on

the grounds east of the buildings and had been of much benefit to the patients, who were left in them as late in the season as possible. The fall of 1886 was raw and wet, and a most promising amputation patient developed a fatal pneumonia. This was the direct cause of abandoning the system.

After seventeen months as superintendent of nurses Miss M. K. Howell resigned, May 1, 1887, to marry. Miss M. E. Francis, of the Class of '87, acted as temporary superintendent, and on graduating received the appointment.

In 1888 new rules and regulations were drawn up. Miss Lois M. Masten, Class of '87, was appointed superintendent to succeed Miss Francis, who resigned July 23. Miss Susan C. Long, Class of '85, was appointed first night superintendent.

Kimberly Cottage (contagious) was built during this year as a memorial cottage by the daughters of John C. Kimberly (the Misses Kimberly and Mrs. Wm. H. Walker).

The porte-cochère and solarium for patients was added to the front of the hospital in 1889 through the efforts of Miss Margaret Moore, a former patient. In the fall of this year two junior nurses, Class of '91, were stricken with typhoid fever. Miss Nettie Perry died in November and Miss Anna Dawson's health was so impaired by it that she was obliged to resign.

The small amount of outside nursing done by the school was a constant source of anxiety to the management, and the superintendent of nurses was continually urged to increase it. This seemed to be an impossibility, as the demands of hospital work continued to outstrip the growth of the school. It was thought that a nurses' home, by allowing a larger school, might solve the difficulty, and the subject began to be agitated.

About January 1, 1890, the position of warden became vacant, and was filled temporarily by Miss Susan C. Long, whose position of night superintendent was transferred to Miss Jeanette Oliver, of the Class of '88.

Mrs. Thomas F. Rochester, who with Mrs. Skinner had organized the school, died January 6, 1890. Through the bounty of Mrs. George B. Gates a nurses' home was built and furnished during the year.

In the spring of 1891 ex-Mayor Scoville died, leaving twenty-five thousand dollars for the benefit of the Training-School. After having had charge of the Training-School for three years, Miss Masten resigned July 1, 1891, and was followed by Miss Clara M. Carter, of the Class of '89. During this year the average number of patients was one hundred and sixteen, of pupil nurses about thirty.

During the year 1892 an outside teacher was employed to give the nurses instruction in sick-cookery. On June 26 a brass tablet was placed in the nurses' home by the pupils in honor of Mrs. Gates. Miss Carter resigned at the end of her year to take up church work. Miss Lucetta J. Gross, of the Boston City Hospital, succeeded her. During this year the first graduate head nurses were employed. Miss Gross remained two years and resigned in 1894. She was succeeded by Miss Kate I. Kennedy, of the Class of '93. Miss Lillian Brewster, a pupil nurse, died of heart trouble while at home on her vacation.

The new wing of the hospital was begun August 31, 1895. An experienced masseuse was employed to instruct the nurses in massage during 1895.

In the spring of 1897 Miss Kennedy resigned and Miss Ellen Van A. Denike, superintendent, with Miss Ellen J. Lingren, assistant superintendent, both of the New York Hospital, were engaged. Under Miss Denike's superintendency the course was lengthened to three years and the allowance was reduced. The outside nursing had become practically a dead letter, nurses, instead, being employed on special duty in the hospital.

The new wing was completed in 1899 and the woman's ward in the old building converted into a dormitory for nurses, the opposite ward undergoing a similar change for the maids.

Miss Denike and Miss Lingren resigned in the fall of 1899 and were followed by Mrs. Amy C. Goodwyn, of the Garfield Memorial Hospital, Washington, D. C. In place of an assistant superintendent a larger number of graduates were employed.

The hospital report of 1899 gives the daily average of patients as one hundred and forty-three, nurses and probationers forty-seven, graduate nurses four.

In looking back to the early history of the school one cannot but be surprised at the great results achieved from such small beginnings.

In the early part of 1900 the benefactor of the school, Mrs. Gates, passed to her reward.

The total number of graduates of the school on July 1, 1900, was two hundred and thirty-one. This did not include two graduates dropped from the rolls for cause.

Nine of the graduates have chosen other occupations, as follows: three physicians, one dentist, one deaconess, one stenographer, two manicurists, and one lodging-house keeper.

Sixty-four have married (twenty-seven per cent. of the total number of graduates), twelve have died, ninety-three have left Buffalo, and one hundred and twenty-six remain in the city.

SPINAL COCAINIZATION

By BEATRICE S. MONTEITH

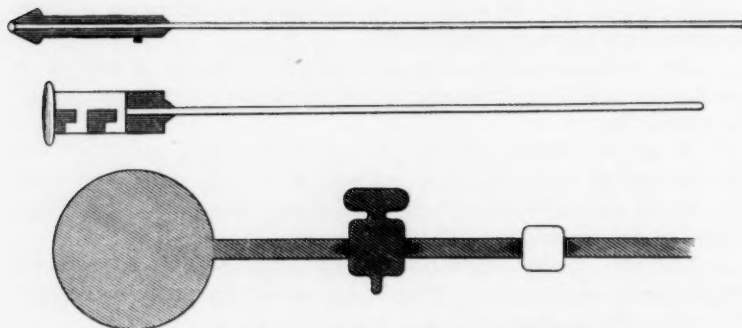
Assistant Superintendent Brooklyn Hospital Training-School

THE ability to produce anæsthesia by the injection of cocaine into the spinal-cord is regarded as one of the most interesting discoveries of the day. While under this anæsthetic the patient is perfectly conscious and fully aware of everything taking place. At the same time she is without any sense of pain, though retaining sense of touch.

This mode of anæsthesia may be adopted when for any reason a patient objects or is unable to take ether or chloroform.

INSTRUMENT

The instrument used is a double needle, the finer needle fitting inside the heavier. The fine needle is four and a half inches long, being one-half inch longer than the heavy needle. A piece of rubber tubing one inch long connects this needle with a small glass bulb; this bulb again connects with a similar piece of tubing. This tubing is attached to a silver stop-cock which connects with another piece of tubing ending in a rubber bulb. The stop-cock is used to preserve the vacuum which is created in the bulb. This entire outfit is boiled.



Drawings of the necessary instrument for spinal cocaine injection.

Two aseptic hypodermic syringes are also required, glass syringes, as they may be boiled, being preferred. One syringe is fitted with the usual hypodermic needle and the other contains the cocaine for spinal injection.

PREPARATION OF COCAINE

The cocaine may be prepared in various ways:

1. Add forty minims of sterile water to cocaine, hypodermic tablets, one grain, boiling this solution one minute.

2. Place cocaine, one grain, hypodermic tablets, in sterile glass, adding enough chloroform to dissolve cocaine. This mixture is rubbed up until the chloroform evaporates. To the remaining sediment is added forty minims of sterile water. The solution is now ready for use.

POSITION AND PREPARATION OF PATIENT

The patient usually sits on operating-table, bent forward, the elbows resting on the thighs. In cases where the patient is unable to take this position the Sims position may be used.

The back is prepared in the same way as for any operation. The dressing is removed when the patient is in position, and the back is again scrubbed. A sterilized sheet is placed over the patient. The opening in the sheet must be large enough to allow the surgeon space for necessary measurements.

INJECTION OF THE COCAINE

Everything being in readiness, ten minims of this prepared cocaine is injected into the skin over the space between the third and fourth lumbar vertebrae. When sufficiently anaesthetized, a small incision is made. The needles, being put together, are now inserted and are attached to the exhausted bulb with rubber tubing and glass bulb. When the needles have pierced the meninges surrounding the filaments of the cauda equina the stop-cock is opened, and almost immediately the cerebro-spinal fluid appears in the glass bulb.

Should this fluid not appear, the inner needle is withdrawn, a wire run through to displace any possible clot, and then it is reinserted, being again attached to the exhausted bulb.

The advantage of the double needle is here apparent. The inner needle being withdrawn, the outer needle remains stationary, thus preventing, in the reinsertion, another puncture of the meninges.

When the cerebro-spinal fluid appears, the glass bulb is detached from the rubber tubing and the syringe attached, containing twenty minims of the cocaine solution, this amount equalling one-half grain.

One minute is taken to inject this quantity, and it is followed immediately by ten minims of sterile water, which fills the needle. The needles are then withdrawn and sterilized, and adhesive plaster is placed over the incision.

Patient now assumes a recumbent position on operating-table, and tests for anæsthesia are begun at once.

EFFECT OF ANÆSTHETIC

The feet are usually anæsthetized first, the time taken being from one to five minutes, and very soon the patient is anæsthetized to waist line.

The height to which the anæsthesia goes varies with the individual. Frequently it goes as high as the third rib, and in some cases the face and part of the scalp have been anæsthetized.

The pulse usually remains regular, from eighty to one hundred beats per minute, and the respirations are natural. The patient has peculiar pallor and free perspiration. Invariably she becomes nauseated, though vomiting may be prevented by giving strong, clear coffee to drink. Anæsthesia lasts one hour and sometimes a little longer.

AFTER-EFFECTS OF ANÆSTHETIC

The after-effects seldom vary. Some patients have slight delirium and all suffer from violent headache, which usually lasts from twenty-four to forty-eight hours. This condition may be relieved by giving from five to ten grains of antipyrine.

Major as well as minor operations are performed under this anæsthetic, thorough asepsis being observed in every detail.

DR. HOWARD KELLY'S METHOD OF CATHETERIZATION

A GLASS catheter is used, having been prepared for use by boiling five minutes in a soda solution.

The nurse then scrubs her hands carefully, places the patient on the bed-pan, exposes the vulva, and separates the labia so as to expose the urethral orifices. She now takes up a pledget of cotton, saturated with boric acid solution, in the grasp of the forceps, and with this thoroughly cleanses the urethral orifice. This is repeated with another pledget when the patient is about to be catheterized. She now draws two sterile finger cots (rubber glove fingers) over the thumb and index-finger of the right hand and, thus well protected, grasps the catheter by its outer end and removes it from the pan in which it has just been boiled, and gently introduces it into the urethra, allowing it to take its own way into the bladder, never under any circumstances using force.—*Johns Hopkins Hospital Bulletin.*

PRACTICAL POINTS ON PRIVATE NURSING

IN CHARGE OF
ISABEL MCISAAC



ENTEROCLYSIS AND COLONIC FLUSHING

BY ANNA A. DAVIDSON
Graduate of the Presbyterian Hospital, New York City

In the onward march of medical science simplicity is conspicuous, simple vapor and hot-air baths, tub-baths, cold sponges, and packs supplanting the medicated baths and powerful antipyretics of former years; and if we continue to depend upon Mother Nature, we will come to believe in the four great principles laid down by a prominent New York physician, namely, warm feet, castor-oil, water inside, and water outside.

We can all count back to the days when it was considered dangerous to give fever patients much water to drink; in fact, a large majority of the laity still hold to this principle, and many a nurse finds she shocks the family by keeping a pitcher of water within the patient's reach. Even in health people do not drink enough, and the system cries out for its proper amount of fluid, which they try to supply by tea and coffee instead of pure water.

Cannot we as nurses teach the world better? A large amount of constipation might be prevented if they would only realize this, for drinking water with meals softens the food and so assists absorption, also drinking between meals stimulates the intestinal glands, aiding secretion, both in stomach and intestines, as well as providing the system with a needed fluid, aiding in the manufacture of blood, and stimulating the kidneys to secretion.

The excellent results of enteroclysis and colonic flushing are becoming more and more recognized by the medical profession.

We in the hospitals, where all new methods have their birth, have accepted this treatment as one of the best of the present age, the results in some cases being remarkable.

In hemorrhage from operation, either primary or secondary, the enteroclysis of normal salt solution has proved most beneficial,—in fact, from shock from any causes,—and one of its best recommendations for

private duty has been that the nurse cannot go astray in giving it, as it is one of those things that can be done while waiting for the doctor, that most anxious of moments for the nurse.

In cases of anæmia, pernicious or simple, and in general sepsis, salt solution by rectum, one or two pints daily, replenishes the blood and gives a gentle general stimulation.

Enteroclysis of salt solution and whiskey, or black coffee, about eight ounces, given four or six times in the twenty-four hours, makes an admirable heart stimulant.

In making coffee for this purpose it needs to be very strong. Four ounces of ground coffee, boiled for ten minutes, is necessary to make eight ounces of the proper strength.

Colonic flushing in nephritis has produced most excellent results. Normal salt solution is generally used, about four quarts, at a temperature of one hundred and twelve degrees. This stimulates the kidneys and overcomes in a great measure the profound toxæmia that often exists in this disease. It may be given as a colonic flushing, distending the colon with the entire amount of the hot fluid, and then syphoning it back, or as a rectal irrigation, allowing the solution to run out immediately. The Kemp tube is the best for this, as the double current permits a continual flow; or two small rectal tubes may be inserted with the same result.

In typhoid or any high fever an irrigation at a temperature of sixty-five degrees assists greatly in reducing the temperature, but distending the colon with any amount of fluid in typhoid is always questionable.

Colitis is treated to a large extent now with colonic flushing of either potassium permanganate of a strength of 1 to 1000; silver nitrate, 1 to 1000; quinine sulphate, ten grains to the quart, or simple salt solution. Some of the most successful results have been from the quinine treatment, as it has a specific action on the amœba. The irrigation in colitis should be given once or twice daily. When the salt solution or quinine is used it may be given as often as every four or six hours.

Hypodermoclysis, or subcutaneous injection, is coming more and more into favor for shock from any cause or for general stimulation. It is given with a large aspirating needle, about five hundred or one thousand cubic centimetres at a temperature of one hundred and six to one hundred and eighteen degrees; it is usually given in the breast or abdomen, with children in the buttocks.

In pneumonia or typhoid, given daily when the heart's action is weak or there is much toxæmia, it has proved very beneficial. There is seldom any pain attending it, and of the many cases I have seen treated

in this way I have never yet seen an abscess, and where aseptic precautions are taken there is practically no danger.

There is less tendency to chill afterwards than in the venous infusion; this is probably owing to the fact that, being injected into the loose tissues, it is taken up slowly by the blood-vessels and the stimulation is more gradual than when injected directly into the vessel; in that case it reaches the heart,—in fact, the entire system,—so rapidly that the stimulation is so sudden it is a shock, and produces a revulsion that is manifested by a chill.

CONVALESCENCE

By RUTH BREWSTER SHERMAN

Johns Hopkins Hospital School for Nurses

SOME years before I entered a training-school I was much struck by a comment on nurses by a lady who had employed several. After praising their devotion to work and their general helpfulness, she added that they seemed to lose interest in their patients when recovery set in and to be almost eager to get away. "The best judge of a game," says the wise Lord Bacon, "is not the player, but the spectator, who sees under what advantages or disadvantages the player takes his part." If spectators criticise our "game," what better chance can we have to learn our faults and make our profession more acceptable to the public?

During a definite illness, be it long and wearing or short and sharp, a nurse's duties are positive and sure, hers—and hers only. She has been trained to watch, recognize, and meet abnormal conditions; to do certain things in certain ways; to fit her thoughts, methods, and efforts to the requirements of the disease rather than of the individual, who at this time has lost his interest in life, his habitual attitude and poise, his natural disposition, and is really, however perverse and wilful he seems, in the hands of his physician, family, and nurse for a new adjustment to life as he regains his health. But what preparation has she made within herself, what training has the hospital given her, to meet the longer, infinitely more trying, and scarcely less important time of convalescence?

In hospital work we practically do not see convalescence, because the patients are so early discharged to make room for more needy ones, and we are too busy with the very sick to give the recovering inmates all the thought and planning they should have; but perhaps we are too ready to feel that this is by no fault of ours, only the pressure of circumstances. We get our "up-patients" dressed and in wheel-chairs in

some pleasant spot, take them food and medicine, perhaps put books within reach or make sure they are near favorite friends; then a dozen duties claim our attention and keep it—usually for too long. Do we get our patient back to bed as soon as the frail body should go? Do we remember how any position, unchanged, becomes an unendurable cramp? that as the hours pass the woman who was left with her face in the shadow and her feet in the sun, may now have the bright light in her eyes and the cold shade on her body? that wraps may slip or clothing be disarranged? that the fact of being up often gives a thirst for water and longing for fresh air which were not felt in bed? that the body, long used to bedclothes, is usually sensitive to chill, pressure, or constriction? Do we ourselves enjoy looking from the same window at the same angle for several hours, and can we talk interminably with the same person whom we see every day? Did we give a thought to the appropriateness of those books? Do we remember that invalids depend greatly on the mere feeling of being personally cared for, and miss it like a true physical comfort if it is suddenly withdrawn? Are we sure that where we left the beds on the porch the occupants will not see disagreeable sights? that they *will* see anything pleasant? that the neighbors are congenial? Patients who walk about and do much for themselves are often pitifully neglected as to the things which they cannot do.

In private work the time of recovery puts a far greater strain on the nurse than the illness, and taxes her resources infinitely more. In the beginning she came, fresh and vigorous, to aid a family worn out by anxiety and care. When convalescence sets in the relatives are relieved, happy, gay; the invalid is regaining his hold on life and needing occupation, recreation, exercise, and amusement at the very time when the nurse is not only tired, but deprived of her strongest incentive to effort—for the loosening of the tension of anxiety by which the family regain their wonted spirits removes the stimulation which vivified her work. The invalid must never think of this; the family, alas, remember it too seldom.

It is for this time that all her knowledge, inventiveness, tact, patience, and self-command are needed, and it is for this time that she should most jealously have preserved any talents or accomplishments which she had before entering the training-school and which are often wholly neglected afterwards; that she may help the peevish child to a happier frame of mind, reconcile the restless, athletic boy to enforced captivity, occupy the book-loving girl without taxing eyes or brain, and make seclusion endurable for the active, energetic man or woman. It is *now* that her skill in cooking and serving food is needed, *now* that she must read aloud for endless hours, *now* that she must massage the weary

muscles, arrange exercises which can be given in bed, or insist upon and regulate necessary exertions. The nurse who can sing or otherwise make music, who can play cards well or teach a new game of solitaire, who can show a new design for knitting with large needles, who can read in another tongue than English, will be more acceptable often—not always—with a grown person. If she can draw, paint, or model in clay; if she can teach simple botany, geology, or ornithology in that time when, after illness, all God's world seems new and wonderful; if she can show worsted work or paper weaving or others of the myriad diversions of the kindergarten; if she remembers the puzzles and games which amused her own childhood; if she can make doll clothes, or rig a ship, or raise a plant from a seed, or a moth from a cocoon, or a frog from a tadpole,—if she can think of things to do, and do them, she will succeed with children.*

And, above all, she should be a story-teller; not in the sense of inventing tales (though this is of inestimable value), but in the sense of making grist of all that comes to her mill—gathering from every walk or chance encounter or unexpected incident something which she can tell her patient in an interesting way; a faculty for reviewing books which cannot be obtained for reading in a manner which will impart something of their native brightness; a knack for quoting funny things stored away, perhaps for many years, in the memory, and for clothing attractively any experience of her own or borrowed with which she enlivens a dull quarter of an hour. A moderate amount of what Dr. Van Dyke calls "good talkability" can be made very welcome in the sick-room.

It is hard work—the hardest a nurse has to do—this adapting herself to the personality of the patient instead of to his disease. Many

* I am so fortunate as to have found, since writing this, the opinion of a high authority on this point of amusing children. The Hon. Sydney Holland, chairman of the London Hospital, in his "Two Lectures to the Nurses of the London Hospital" (England: Whitehead, Morris & Co., December, 1897), a pamphlet which every nurse ought to read and own, says:

"If you cannot make a doll out of a pocket-handkerchief, you must learn how. A nurse's education is not complete without this useful accomplishment, nor do I feel sure that any woman is justified in calling herself 'trained' unless she can make boats and frogs out of paper. Children love games of everyday life played with anything which does service for a doll better than with a real doll. Can you tell stories to children? It is dangerous, because if you begin you will have to go on; but how they do love stories! Disturbing subjects must not be mentioned. They like simple stories with no stirring incident. A string I always play on is a child doing something to surprise and please its mother or doing some unexpected kindness."

The chairman should certainly add, however, that no normal child likes too evident a moral to its story, and that sick children especially resent "preaching." Every word of the two lectures, however, is most valuable.

times she will feel like an overstretched elastic cloth with all the rubber fibres broken and only the unyielding fabric left, like a sponge from which all moisture has been squeezed and wrung. And through it all with the skill of Ulysses must she steer her course between Scylla and Charybdis and guard against the danger of doing too much for her convalescent, remembering always that the truest service is to speed the return of normal ethical and physical relations with life, and the greatest injury is to undermine his native self-reliance and coddle him into too long or too weak a mental or physical dependence upon others; for as surely as a nurse can be an inestimable blessing to an invalid during illness, just so surely is there a point beyond which she may, unless she is very wise, resolute, and tactful, counteract all her own good work and almost stop her patient's improvement. Used to being waited on, many convalescents will indefinitely defer making any effort for themselves, and their attitude is often seconded by anxious relatives, who fear over-exertion for the invalid and, perhaps naturally, mentally accuse of selfishness the nurse who withdraws part of her own services and tries to arouse some activity in her charge. It takes endless tact and discretion to manage this point, but it must be done nevertheless, for however much a nurse may be misjudged, her real duty is not to endlessly wait upon her patient, but to restore his ability to wait upon himself.

This is and can be only a rough and poor outline of a large subject: a few thoughts which, if they can set nurses yet in training to thinking for themselves along the lines of preparation for convalescent nursing, will lead to the discovery of far more than is suggested here. What I have chiefly tried to say is, that the serious "complications and sequelæ" of any disease are not only those enumerated in the medical text-books, but also apathy and egotism, dulness, discontent and ennui, selfishness and indifference to the claims or rights of others; and for these symptoms of decadence a nurse must, after a long and trying case, watch herself as well as her patient. Doing physical battle for one, she must do moral battle for two, and should arm herself accordingly. Two recent remarks come strongly to mind and balance each other. The first is the complaint of a patient in a hospital ward:

"The trouble is, I've been here too long. It is three months since my operation, and everyone has lost interest in me."

The second is the explanation by a head nurse of her choice of work:

"I trained for private nursing and never dreamed of doing anything else, but I came back to the hospital because I found I'd do *anything* rather than push an invalid in a wheel-chair."

Is it not probable that if a nurse whose goal is private duty during her years of preparation has her attention directed a little more ex-

plicitly to the requirements of the wearisome time which comes "three months afterwards," when her patient will be, not in bed but still not beyond a chair, she will so forearm herself that she need later make no such painful discovery of her own limitations to turn her aside from "the part which she hath chosen"?

The remarks made by Mrs. Henry Gold Danforth at the graduating exercises of the School of Nurses of the Rochester City Hospital are so much in the line of Miss Sherman's paper that we quote from them, as an appendix:

"There are two courses of instruction which would be of great value to all nurses which are, I think, not included in the curriculum of any school. It is not quite easy to accurately name either of them, but the first might be called Personal Experience and the second Nursing Citizenship.

"Perhaps in time there will be a chance that the second course may have a growing attraction, but the first probably only the devoted few will ever be willing to take, for its instruction must lie in the tedious process of trying it yourself; in other words, every nurse should feel that her equipment is not complete unless she has herself experienced the miseries of a good, hard illness, with a tedious convalescence full of complications, large and small, and some instructively sharp pains. How otherwise can it ever be possible to thoroughly understand the mighty temptations and trivial trials of a patient, the utter loss of a scale of ordinary existence for every event and happening of the twenty-four hours, or the sense of absolute dependence on a will not your own, with a childish impatience of that very dependence and its alternate of utter confidence and self-surrender? It is the custom to condole with a nurse in training over what is called her 'loss of time' by illness. To do so is wrong; properly used, every minute of that lost time should carry invaluable lessons in applied knowledge, not only as to what it feels like to be the one cared for, but whether the care received be good or ill, as to the little personal ways that mean more of comfort and discomfort to a patient than the larger matters which will surely be learned in class."



EDUCATIONAL

IN CHARGE OF
ISABEL HAMPTON ROBB



THE SPECIAL COURSE IN HOSPITAL ECONOMICS

THE committee appointed from the Superintendents' Society on the special course for nurses at Teachers' College are issuing the following circular as an appeal for funds to carry on, on an assured basis, this most important and far-reaching piece of work. So far the Superintendents' Society has really shouldered the brunt of the work and also the expense in subscribing funds and in the voluntary offering of time and trouble, the different nurse lecturers having had only their travelling expenses paid, while Miss Alline, also a member of the Superintendents' Society, has practically, through altruistic enthusiasm and belief in the course, made a free gift of her time and work to the cause, as the financial return to her was so insignificant, compared with what any nurse can earn in other ways, as to be practically counted out of a fair consideration of the question.

Every new piece of work must be demonstrated to the public before the public will take an interest in it, and for this demonstration those who believe in the work must be willing to spend money. Now we may fairly ask the public to take a share of interest, and it is to be hoped that those nurses who are in a position to reach people of means who are desirous of aiding the cause of education will do all in their power to bring the Hospital Course at Teachers' College before them. Single leaflets may be obtained from Miss Walker, Pennsylvania Hospital, Philadelphia:

"The announcement for 1901-1902 of the Special Course in Hospital Economics at the Teachers' College, Columbia University, is now ready for circulation, and may be obtained on application to Miss Anna L. Alline, Teachers' College, Columbia University, New York.

"Six students are completing the course for the year 1900-1901, and it is hoped that at least as large a class will be formed for the coming year. Should any nurse of exceptional ability come under your notice, we trust you will place the advantages of the course before her.

"It is important that application be made *early* in the summer.

"The expenses of the past year were met in part by contributions from many individual superintendents of training-schools. Since then no improvement has taken place in the financial condition, and for the coming year there is no present prospect of any other contributions. The work done by the students at the college

is all included in the regular courses with the exception of the course on Hospital Economics. For this branch a trained nurse as instructor is required, and it is to meet the expenses of providing this instructor that money is urgently needed.

"The college is prepared to help by giving two hundred dollars yearly in return for a short course on Home Nursing, to be given to other students by the instructor. The lecturers on Hospital Economics also aid, by giving their services free, only receiving the amount of the travelling expenses incurred.

"For this coming year we need seven hundred and fifty dollars, and in order to retain the services of a thoroughly qualified trained nurse as professor at the head of this department, at least fifteen hundred dollars yearly should be forthcoming.

"Fifty thousand dollars will endow a chair of Hospital Economics, and give these (now special) students a recognized position in the college.

"Five hundred dollars, if offered as a scholarship to a selected student, will pay the total expenses of her term at the college.

"We most earnestly ask for the helpful sympathy of all who are interested in the management of hospitals and the care of the sick. This fuller and broader preparation for their future work must undoubtedly prove of value to those who undertake the management of a hospital or of a training-school for nurses. In the past many women of ability have failed, or have gained their experience sadly and bitterly, at the expense of the hospitals in which they held appointments, owing to the fact that their training had fitted them to care for the sick with devotion and skill, but had in no way prepared them to be either teachers or superintendents. They entered upon the work entirely inexperienced and quite unfitted to manage the business department of an institution or to prepare for their life-work those who had entrusted themselves to their care.

"Any contributions for our present needs, be they small or large, or assistance towards the endowment of a chair of Hospital Economics, will be most gratefully received. It is hoped that many friends of hospitals will aid these efforts of the superintendents of to-day to secure for their successors an education which must prove to be of great benefit to them and to all who are connected with any hospitals in which they may hold positions of responsibility."

The leaflet is signed by the whole committee.

We have received the following report of the last year's class:

"The class of Hospital Economics, numbering six members, completed the year's work at Teachers' College, Columbia University, the first of June. The rank of the class as a whole was very good throughout the entire list of final examinations, and in the courses of biology and bacteriology they were the palm-bearers in a class of some thirty students. The instructor has asked that we send him twenty like them next year. We are pleased to make this report, not only in commendation of the class in question, but also as encouragement to those who expect to take up the work this year. Examinations are not looked forward to, as a rule, with much pleasure, and as a matter of fact have been a constant but, as they have proven, a groundless anxiety back of all their efforts.

"While expecting a full report of the work later, and therefore not wishing to elaborate any particular points now, we still think it may not be amiss to express in a general way our thanks to the many friends who have shown great interest and given most kind assistance to the class in their many excursions to places of interest in the city and vicinity. These trips have been most beneficial

as practical demonstrations of the numerous questions which daily confront the worker in her own field of labor. It is by just such means of coöperation that the many problems of our work will eventually be brought to some systematic state. The help of our friends so generously given in this broad way is thoroughly appreciated.

"A. L. A."

A DEMONSTRATION OF NURSING WORK

By SARA ANICE BOWEN

Boston City Hospital

For the past three years the Boston City Hospital has given annually a practical demonstration of the work done by the nurses in the Training-School. The idea originated in the Illinois Training-School, Chicago, where a part of the nurses gave an exercise in practical work for the benefit of the rest of the members of the school. This idea was afterwards carried out upon a larger scale in the Presbyterian Hospital, New York. The elaboration of the plan in detail may be made to fit the capacity and equipment of any training-school.

The demonstration, which is given in the surgical amphitheatre, consists of four groups, which follow one another successively. The separate parts of each group are carried on simultaneously, which gives added interest to the programme and confidence to those who participate in it.

The following is the programme used at the Boston City Hospital this year:

GROUP I.

Cupping.
Hot pack.
Ice poultice to abdomen.
Bandage to leg.

GROUP II.

Bed-making, illustrated without and with the patient in bed.
Turning the mattress with the patient in bed and changing the bed-gown.
Plaster bandage.
Flaxseed poultice to throat.
Bathing and dressing an infant.

GROUP III.

Preparation of a patient for operation.
Aseptic dressing.
Foot-bath in bed.
Esophageal feeding.

GROUP IV.

The care of an emergency, which consists of bringing in a patient who is supposed to be in collapse and administering the treatment: elevating the foot of the bed, applying heaters, preparing and giving a hypodermic injection, giving oxygen, etc.

In carrying out this programme it is necessary to have several patients to act as subjects. These are usually easily obtained from among the convalescents. Invitations are sent out to the friends of the institution and to any who may be interested in hospital and nursing work.

The benefit of such an exercise as this is perhaps, first of all, to the nurses who participate in it. The discipline of doing a particular thing under the critical observation of a number of spectators brings out one's best effort, and the practice necessary to the perfect performance of her part is of obvious help to the nurse.

Much interest has been manifested by the public at large in these demonstrations. Graduate nurses who have been some time away from the hospital, and who are anxious to improve every opportunity to keep in touch with the advancement of nursing work, can see in these demonstrations the practical working of methods of which otherwise they have only a vague, theoretical knowledge. To those who know nothing of the care of the sick this demonstration gives an entirely new idea of the practical way to make sick people comfortable. The skill and dexterity necessary to the successful administration of treatment for the relief and comfort of patients comes as a revelation to those who have never witnessed it.

In these days the value and usefulness of the work of trained nurses need not to be demonstrated, but if by such an exercise as that described above we can in any way help to show the public that the training-schools in connection with our hospitals are seeking to teach their nurses earnestness and faithfulness in the details of their work, an added usefulness will be given to the occasion.



CHILDREN'S DEPARTMENT

IN CHARGE OF
LOUISE C. BRENT



A BIBLIOGRAPHY OF ARTICLES ON VACATION SCHOOLS AND PUBLIC PLAYGROUNDS FOR CHILDREN

SO MANY people are now interested in the extension of the vacation school system and the management of public playgrounds that we think it will be useful to give a bibliography of the literature upon these subjects:

PLAYGROUNDS.

Miss American, in the *American Journal of Sociology*, November, 1898.

"Playground Progress in Seward Park," by Charles B. Stover, *Charities Review*, May 4, 1901, 105 East Twenty-second Street, New York.

Charles Mulford Robinson, *Atlantic*, April, 1899, under title, "Improvement in City Life."

Jacob A. Riis, *Atlantic*, July to December, 1899, inclusive.

Articles in *Municipal Affairs*, December, 1898, and June, 1898.

"Public Playgrounds and Baths in Boston," *Engineering Record*, September 17, 1898.

"Report of the Committee on Small Parks in New York," 1897.

Reports of Park Commissioners in various large cities.

Out-door Recreation League Advocate, New York.

VACATION SCHOOLS.

"Report of the Chicago Vacation School Committee of the Women's Clubs," 1898, Chicago Women's Club.

The same, 1899. These include playground work also.

Articles in *The Teacher*, September, 1898, and in *The Outlook*, August 5, 1899.

Article by Charles Zeublin in *American Journal of Sociology*, September, 1898.

THE USE OF FAIRY TALES

(Extracts from Felix Adler, in "The Moral Education of Children," International Education Series.)

" . . . This species of literature can be divided broadly into two classes—one consisting of tales which ought to be rejected because they are really harmful, . . . the other of tales which have a most beautiful and elevating effect, and which we cannot possibly afford to leave unutilized.

"The chief pedagogic value they possess is that they exercise and cultivate the imagination. Now, the imagination is a most powerful auxiliary in the development of the mind and will.

"The familiar anecdote related of Marie Antoinette, who is said to have asked why the people did not eat cake when she was told that they were in want of bread, indicates a deficiency of imagination. . . . Much of the selfishness of the world is due, not to actual hard-heartedness, but to a similar lack of imaginative power. It is difficult for the happy to realize the needs of the miserable. Did they realize those needs, they would in many cases be melted to pity and roused to help. The faculty of putting one's self in the place of others is therefore of great, though indirect, service to the cause of morality, and this faculty may be cultivated by means of fairy tales.

"As they follow intently the progress of the story, the young listeners are constantly called upon to place themselves in situations in which they have never been, to imagine trials, dangers, and difficulties such as they have never experienced, to reproduce in themselves, for instance, such feelings as that of being alone in the wide world, of being separated from father's and mother's love, . . . etc. Thus their sympathy in a variety of forms is aroused.

"In the next place, fairy tales stimulate the idealizing tendency. What were life worth without ideals? . . . Thus faith itself cannot abide unless supported by a vivid idealism. . . .

"In speaking of fairy tales I have in mind chiefly the German Märchen. . . . The Märchen are more than mere tales of helpful fairies. They have, as is well known, a mythological background. . . . They come to us from a time when the world was young. They represent the childhood of mankind, and it is for this reason that they never fail to appeal to children. The Märchen have a subtle flavor all their own. They are pervaded by the poetry of forest life, are full of the sense of mystery and awe, which is apt to overcome one on penetrating deeper and deeper into the woods, away from human habitations. . . . But per-

haps their chief attraction is due to their representing the child as living in brotherly fellowship with nature and all creatures. Trees, flowers, animals, wild and tame, even the stars, are represented as the comrades of children. . . . The child still lives in unbroken communion with the whole of nature; the harmony between its own life and the enveloping life has not yet been disturbed, and it is this harmony of the human with the natural world that reflects itself in the atmosphere of the Märchen and makes them so admirably suited to satisfy the heart of childhood.

" . . . My first counsel is: Tell the story; do not only give it to the child to read. There is an obvious practical reason for this. Children are able to benefit by hearing fairy tales before they can read. But that is not the only reason. It is the childhood of the race, as we have seen, that speaks in the fairy story to the child of to-day. It is the voice of an ancient, far-off past that echoes from the lips of the storyteller. The words 'once upon a time' open up a vague retrospect into the past, and the child gets its first indistinct notions of history in this way. . . . The child as it listens to the Märchen looks up with wide-open eyes to the face of the person who tells the story, and thrills responsive as the touch of the earlier life of the race thus falls upon its own. Such an effect, of course, cannot be produced by cold type. Tradition is a living thing, and should use the living voice as its vehicle.

"My second counsel is also of a practical nature, and, I make bold to say, quite essential to the successful use of the stories. Do not take the moral plum out of the fairy-tale pudding, but let the child enjoy it as a whole. Do not make the story taper towards a single point, the moral point. You will squeeze all the juice out of it if you try. Do not subordinate the purely fanciful and naturalistic elements of the story, such as the love of mystery, the passion for roving, the sense of fellowship with the animal world, in order to fix attention solely on the moral element. On the contrary, you will get the best moral effect by proceeding in exactly the opposite way. Treat the moral element as an incident; emphasize it, indeed, but incidentally.

"How often does it happen that, having set out on a journey with a distinct object in mind, something occurs on the way which we had not foreseen, but which in the end leaves the deepest impression on the mind. The object which we had in view is long forgotten, but the incident which happened by the way is remembered for years after. So the moral lesson of the Märchen will not be less sure because gained incidentally. . . ."



PROGRESSIVE MOVEMENTS

IN CHARGE OF
LUCY L. DROWN



THE COMMITTEE OF THE GENERAL FEDERATION OF WOMEN'S CLUBS ON THE INDUSTRIAL PROBLEM AS IT AFFECTS WOMEN AND CHILDREN

SEVERAL of our nurses' associations are members of the Federation of Women's Clubs; the Johns Hopkins Alumnae have joined the State Federation of Maryland, and the Metropolitan Nurses' Club of New York belongs to the New York State Federation, having been, we believe, the first Nurses' Club to join the Federation of Women's Clubs. We believe, therefore, that the appended schedule of work mapped out by Mrs. Kelley, chairman of the Committee on the Industrial Problem, for the study of the whole federation during the coming year will be of value and interest:

TO THE FEDERATED CLUBS: It is the object of this committee to bring to the attention of the clubs some of the ways in which the industrial problem as it affects women and children affects us, and some of the ways in which we may affect it. It is believed that the vast power of intelligent women to contribute at once towards a peaceful and beneficent solution of the industrial problem is not generally appreciated.

The industrial problem as it affects women and children was never so complicated as at the present day. The very existence of the federation and of the clubs which form it is due to the fact that the industries have gone out of the homes of the prosperous, leaving to the women in those homes leisure for study, recreation, and philanthropy. But these industries have largely gone into the homes of the poor, ruining the domestic life of the home workers and threatening the life and health of those who buy the products (this is especially true of the needle trades). On the other hand, manufacture and commerce have largely drawn from the homes of the wage-workers the women and children to work in factories, workshops, stores, offices, and public-service employment.

For these reasons, the Committee on the Industrial Problem asks that each club will give at least one programme during the coming season to the consideration of one or more of the aspects of the problem suggested below. In connection with Aspect 3, it is desirable to consider the following questions: What is the legal age for employing children in your State? Have you a woman factory inspector? Is there a license law for manufacture in homes? What is the legal working day?

While Working-Women's Clubs can scarcely be regarded in themselves as an aspect of the industrial problem, yet they grow out of the present industrial conditions and afford a valuable means of modifying those conditions. They have, therefore, been embraced in this circular, and the League of Working Women's

Clubs has been asked to coöperate with your committee in the preparation of the references.

ASPECTS OF THE INDUSTRIAL PROBLEM

1. WOMEN AS EMPLOYERS AND EMPLOYEES IN THE HOME

- "Domestic Service," Lucy M. Salmon, Vassar College, Macmillan, 1901, Second Edition.
- "Hours of Labor in Domestic Service," Massachusetts Bureau Labor Statistics, 1898.
- "Social Conditions of Domestic Service," Massachusetts Bureau Labor Statistics, 1900.
- "Cost of Living," Mrs. E. H. Richards, Wiley, New York, 1899.
- "Standard of Life," Mrs. Bernard Bosanquet, Macmillan.
- "Economic Function of Women," E. T. Devine, American Academy of Social Science, 1894 (Publication No. 133).
- "Women and Economics," Mrs. C. P. Stetson, Boston, Small & Maynard.

2. WOMEN AS INDIRECT EMPLOYERS—PURCHASERS OF THE PRODUCT

- "Evolution of Modern Capitalism," John A. Hobson.
- "Political Economy (Part V.)," Professor Richard T. Ely, University of Wisconsin.
- "Address by Professor Marshall," reprinted in *Journal of Economics*, Harvard University, January, 1897.
- "The Union Label," Mr. John Graham Brooks, Bulletin of Department of Labor, March, 1898.
- "The Consumers' League," Mr. John Graham Brooks, published by the National Consumers' League.
- "The Consumers' League Label," Mrs. Frederick Nathan, *North American Review*, February, 1898.
- "Address on the Consumers' League," Mrs. Frederick Nathan, Report of Convention of Working-Girls' Clubs, May, 1897.
- "The Consumers' League," Mrs. Josephine Shaw Lowell, published by the Christian Social Union.
- "Work and Problems of the Consumers' League," Professor Frank L. McVey, *American Journal of Sociology*, May, 1901.

Articles on the Consumers' League in *Churchman*, November 11, 1899; *Outlook*, February 24, 1900; *Independent*, December, 1899; "Proceedings American Economic Association, 1899," by Mr. John Graham Brooks; "Proceedings American Association for the Advancement of Science, 1899," Florence Kelley; *American Journal of Sociology*, November, 1899, Florence Kelley; "Proceedings American Social Science Association, 1899."

"Reports of the Consumers' Leagues," National, State, and City, may be had on application to the office, 105 East Twenty-second Street, New York City.

3. WOMEN AND CHILDREN AS EMPLOYEES—CONDITIONS OF LABOR IN STORES, FACTORIES, SWEATSHOPS, TELEGRAPH, TELEPHONE, AND MESSENGER SERVICE

- "Two Weeks in Department Stores," Annie Marion MacLean, *American Journal of Sociology*, May, 1899.

- "How the Other Half Lives," Jacob Riis, New York, 1890.
"Children of the Poor," Jacob Riis, New York, 1892.
"Hull House—Maps and Papers," Jane Addams and others, T. Y. Crowell, 1895.

4. FACTORY LAWS AND SCHOOL LAWS AFFECTING WOMEN AND CHILDREN

- "Summary of Laws Relating to Compulsory Education and Child Labor in the United States," compiled by Mrs. George Sikes, issued by the Chicago Association of Collegiate Alumnae, may be had on application to the National Consumers' League, 105 East Twenty-second Street, New York City.
"Reports of State Factory Inspectors" may be had on application to the following: Hon. Rufus Wade, State House, Boston, Massachusetts; Mr. John J. McMackin, Commissioner of Labor, Albany, New York; Department of Factory Inspection, New Era Building, Chicago, Illinois.
"Special Report on Child Labor," Mr. Halford Erickson, Madison, Wisconsin.

5. WORKING-WOMEN'S CLUBS

- "The Club Workers," "Reports of the Association of Working-Girls' Clubs," "File 1. Publications of Working-Girls' Clubs," and further information and literature may be obtained from Miss C. C. Wilkinson, 807 James Street, Syracuse.

The Committee on the Industrial Problem as It Affects Women and Children will be grateful to clubs who forward to its chairman copies of papers which seem especially valuable. It is hoped that much original material may be brought to light in connection with each aspect of the problem, and especially with No. 3, on which the present literature is deplorably scanty.

FLORENCE KELLEY, Chairman,
105 East Twenty-second Street, New York City.

VICTOR EMMANUEL III., King of Italy, has done more for human freedom in this new year of a new century than Napoleon accomplished in the name of Liberty by fifty battles whose thunders shook the world. This boy ruler has given royal recognition and the title and insignia of office to an order of nobility more ancient than the Manetho Dynasty and more glorious than the House of David. Most honorable of all titles yet bestowed by human hands, it is to be conferred (so the kingly edict ran) only upon persons distinguished for their knowledge and service in the art and theory of Industry, and any man in Italy may enter the lists for this exalted honor, from peasants of the hill country to princes of the realm.—*Chicago Commons*.



PROPHYLACTICS

IN CHARGE OF
MARY M. RIDDLE



SANITATION OF PUBLIC INSTITUTIONS

By CHARLES F. WINGATE

(Republished by permission from *Charities*, Volume VI., page 216)

HOW TO EXAMINE AN INSTITUTION

As an aid to the managers and Advisory Boards and committees of charitable or correctional institutions and to volunteer visitors to such institutions I submit the following hints as to how to determine the sanitary condition of a building of this class, based upon my professional experience of many years.

In approaching such a building one should first notice its surroundings and general appearance. Is it shut in by other buildings? Is it open to the free circulation of air? Are there many trees to obstruct sun and air and create and foster damp? Is the site high and dry or low and damp? Are the buildings of brick, stone, or wood? Do rain and melted snow soak into the ground around the foundations? Is the roof-water carried away from the building so as not to saturate the soil? Are there abundant windows? Does the building face so as to have the benefit of the prevailing summer breeze? Are there sheltered yards or walks for exercise in pleasant weather? Is the general aspect cheerful and wholesome or bleak and forbidding?

On entering the building: Is the in-door atmosphere fresh and pure, or is it stale, close, and stoggy,—a combination of odors from kitchen and laundry, and of floors scrubbed too frequently until they become water-soaked? Are the inmates pallid, inert, and tired, and do the employees look nervous, worn, and anxious? Do flowers and vines flourish, and is there any sunlight apparent or any circulation of air? Where plants thrive human beings do also, as they both require light and air, while plants suffer from dust and a dry atmosphere. Darkness and dirt are akin. It is impossible to keep a place clean if there are dark corners and general dinginess. In one of the finest hospital buildings in the world the corridors are lighted by gas by day, and in the matron's bathroom I

had to strike a match to distinguish the porcelain tub. It is marvellous how little regard to light is paid by most builders. It is a crying evil in houses of every class and size.

Examine the cracks in the floor, and if they are full of wet dirt, as is often the case, it shows too much swilling of water over old, rotting floors. I prefer using a damp mop to such wholesale methods, which may do for a ship's deck, but not for a corridor or dining-room occupied by human beings.

Let us now investigate the cellar and basement, for the underpinning of a building is the vital part. It affects the whole structure. If we find dirt, disorder, cobwebs, and neglect there, we may condemn the management at once. In the cellar is the heating apparatus and air supply. There fuel is stored and often the refrigerator, hence the importance of having it sweet and dry, light and airy. "Houses, like plants, must not have wet feet," and a damp cellar is the worst of all evils. Therefore look sharply for signs of damp. If the pipes and other metal work are rusty, if the plastered ceiling bulges or has fallen in large patches and the exposed laths "buckle," if the cracks in the stone or brick flooring are black with moisture, if the beams and posts have become mere punk with dry rot, so that a knife will penetrate them like cheese, or if the walls are clammy with moisture, then the cellar should be condemned. Vegetables will rot there, cobwebs and mildew flourish, and mould and decay abound. Cellar air will rise to every floor and penetrate every crack and crevice. If it is foul and damp, it debilitates and weakens the inmates and subjects them to colds and to increased danger of infection. Show me a house exposed to such influences, and I will guarantee a continuous crop of little ailments, and regular outbreaks of typhoid, diphtheria, and grip when they are prevalent. You cannot have health where there is constant in-door damp.

Next look at the plumbing. If the drain-pipes are hidden underground, then suspect them. They should be exposed to view along the side-wall or ceiling. If they are of brick or stone, so much the worse. If they have sagged or are not properly supported, they need bracing up. Are they light cast iron, brittle and rusted, of thin metal and short hubs? then they should be replaced with extra heavy cast iron. See that the lead in the joints does not protrude, owing to unequal expansion and contraction, and that the lead shows the marks of the plumber's calking tool. If pipes are pieced with pieces of sheet lead or tin wrapped with wire, it proves chokage with grease and that some botch plumber has been meddling with them. If there are traps or man-holes to open for removing obstructions, which have flat, round covers, see that they are tight, as they easily work loose, and should be replaced by brass trap screws.

Note if areas are protected from dead leaves and dirt, and if open to rain and snow, that the latter do not soak into a hole in the ground.

Are there windows on opposite sides of the cellar to insure a cross-current of air, and are they ever opened? Are ashes stored for any time in the cellar? Are the coal-bins so high as to obstruct light and air circulation? Are there any plumbing fixtures in the cellar, excepting a sink to draw water? If so, they are not desirable.

What is the source of the fresh-air supply? Is it likely to be contaminated from coal-dust, sheet-dust, or ashes? How long since the cold-air box was cleaned? Is it made of galvanized iron, or of unseasoned wood full of cracks and openings for cellar air to enter? Lastly, are there any recesses in the walls where drain-pipes are carried which allow cellar air to rise to upper floors?

Having discussed the immediate surroundings and the cellar, I will now consider the basement of the building. Of course, everyone understands why it is wrong to occupy a ground-floor for sleeping purposes. Yet one so often finds basements and even cellars used as living-rooms in hotels, apartment houses, and other buildings that it is proper to refer to the matter. It is bad enough to place plumbing fixtures in such places, but no person should sleep on the ground-floor under any circumstances.

We may next examine the store-rooms and refrigerators where milk, ice, and food are kept, and note if they are properly located and kept clean and sweet. Light is an important aid to cleanliness, and such receptacles should not be placed in dark corners where they are apt to be neglected. The less woodwork there is about such places the better. If they can be constructed with cement floors, so as to be occasionally washed down with a hose, it will be advantageous. Milk should not be placed directly on ice or in the same compartment with articles that may taint it. A refrigerator should not connect directly with a sewer or house-drain, but should have a waste-pipe separately trapped which discharges over an open sink in the cellar. This should also be trapped, unless it has an independent outlet. This waste-pipe should be frequently flushed with boiling water and soda, as it soon gets slimy and foul.

In this connection let me say a warning word about filters. There are scores of different devices for filtering water. In many places some such appliance is indispensable. No filter, however, can be trusted unless it can be periodically cleaned. The more impurities it collects, the more it becomes itself a source of contamination, and unless the current can be reversed and the filtering material thoroughly purified, it is to be condemned. In the most perfect filters the material is not only washed in this way, but it is oxidized by forcing a current of air through it under

great pressure, and thus all impurities are destroyed. The importance of care in selecting the right kind of a filter cannot be overstated.

Laundries in institutions are often very objectionable. They are badly located, at the foot of hall stairs or in places where the steamy vapor can rise to upper floors. Or they are dark and gloomy, and usually too small and wholly unventilated. A laundry in an institution should be detached from the main building and should be spacious and well lighted. There should be abundant ventilation, and the health of the laundresses should be duly considered. The comfort and health of domestic employees might well receive more attention. Better sleeping-accommodation should be provided. Two adults should never occupy the same bed. More baths for servants' use should be provided, with rooms where they can rest when ill and overworked. The appearance of domestic servants in general does not indicate that they enjoy the best of health, and few of them are as ruddy and robust as they might be.

Every precaution against fire should be taken in laundries, especially in drying-rooms and around stoves and other heating apparatus. Such places should be provided with automatic sprinklers, and fire extinguishers should be hung in plain view. Pails of fine sand or sifted ashes are very useful for putting out small fires, and are less troublesome than water-buckets, which are apt to be forgotten and the water allowed to evaporate or become foul and offensive.

In inspecting a kitchen in an institution it is well to inquire how the food is prepared; whether the cooking utensils are scrupulously clean; where garbage is kept, and how often it is removed. Sinks should be scoured and their traps kept free from grease by frequent doses of potash dissolved in boiling water. Pails, kettles, and other utensils should not be stored under sinks, but in closets, as they may jam the lead pipes and thus do much mischief. Such closets and all store-rooms should be light and airy. It is a common blunder for architects and builders not to arrange windows to properly light living- and work-rooms. Sinks and wash-tubs will be placed in dark corners; hall-ways will be quite dark or in a twilight gloom. Lamps or gas must be used most of the time, and as a result the help are never contented or comfortable.

We shall never get these mistakes corrected until there are more women architects, and I am surprised that women are not consulted more about such essentials.

[The prospect, in the near future, of nurses fitting themselves for positions as sanitary inspectors is discussed in many directions. We know of nurses who would like to study the technical part of such work, and *THE AMERICAN JOURNAL OF NURSING* will be pleased to receive inquiries in regard to such study.—Ed.]

HOSPITAL AND TRAINING-SCHOOL ITEMS

IN CHARGE OF
LINDA RICHARDS



"You do solemnly swear, each by whatever she holds most sacred:

"That you will be loyal to the physicians under whom you serve, as a good soldier is loyal to his officers.

"That you will be just and generous to all worthy members of your profession, aiding them when it will be in your power to do so.

"That you will live your lives and lead your profession in uprightness and honor.

"That into whatsoever house you shall enter in it shall be for the good of the sick to the utmost of your power, and that you will hold yourselves aloof from all temptation.

"That whatsoever you shall see or hear of the lives of men and women, whether they be your patients or members of their households, you will keep inviolably secret, whether you are in other households, or among your own friends."

To this oath did fifty-two young-women graduates of the New York School for Trained Nurses bow in acquiescence on the occasion of the annual commencement exercises of the school, held in the chapel of the City Hospital on Blackwell's Island, and there was a buzz of favorable comment from the physicians and others who were present, for the oath, which was administered by Mrs. Cadwalader Jones, who is chairman of the Advisory Board of the school and presented the diplomas, came as a surprise to all.

"As you all know, doubtless," began Mrs. Jones, "a physician who graduates from a reputable medical school takes upon his graduation what is known as the 'oath of Hippocrates.' I will ask you to listen to a version of the Hippocratic oath, modified to suit your profession, and when you have heard it, to accept its obligations and to observe them faithfully."

Mrs. Jones then recited the oath, saying in conclusion:

"If you accept these obligations, let each one bow the head in sign of acquiescence. And now, if you shall be true to your word, may prosperity and good repute be ever yours; the opposite if you shall prove yourselves forsworn."

At the appropriate period in Mrs. Jones's address each member of the graduating class, which numbered thirty-eight young women from

the regular course and fourteen from the post-graduate course, lowered her head as directed.

The class was divided into two sections, and the leaders of these in meritorious work in the Training-School received their diplomas last. They were Miss Margaret M. Abbot and Miss M. Matilda Wescoat.

Dr. Edward S. Peck, chairman of the Board of Examiners, acted as presiding officer, and Charities Commissioner John W. Keller delivered the commencement address. Dr. Edward S. Fisher, visiting physician of the City Hospital; the Rev. George T. Purves, pastor of the Fifth Avenue Presbyterian Church, and the Rev. M. J. Lavelle, rector of St. Patrick's Cathedral, delivered short supplementary addresses, and Superintendent Mary S. Gilmour, of the Training-School, read the annual report. A reception followed the exercises.

In a manner that was a credit to themselves and highly satisfactory to their friends the Class of 1901 of the Brooklyn Hospital Training-School was graduated Wednesday, May 29.

The exercises were held in the large assembly-room of the school, which was crowded with friends of the nurses, and the many floral souvenirs presented to the class constituted a very beautiful and effective decoration.

The graduates, twelve in number, composed the twentieth class that has been graduated from the Training-School, and compared favorably with those of former years.

The president of the Board of Trustees of the hospital, Mr. John E. Leech, was the chairman of the meeting, and Mrs. Thomas R. French and Mrs. Frederick P. Bellamy, president and vice-president respectively of the Woman's Auxiliary, presented the diplomas and badges to the graduates.

The programme was opened by prayer by the Rev. Dr. Goodenough. Then followed the Class Song.

The words were written by Miss Elizabeth Lovena Hatfield and the music by Mrs. Grace Beardsley Mott. This is the first time in the history of the Training-School that a Class Song has been adopted by any graduating class.

This one selection constituted the musical part of the programme.

The Hippocratic oath was then administered to the graduates by Miss M. I. Merritt, superintendent of the Training-School.

In accordance with the usual custom, a prize was awarded by the auxiliary to the nurse having the highest general record during her term in the school.

Miss Elizabeth Lovena Hatfield was the winner of this prize, a set of

hypodermic instruments. James McKeen, former president of the Hamilton Club, then delivered the address to the class.

On the conclusion of the exercises a reception was held by the graduates.

“CLASS SONG—1901

“Classmates, pause, review our school-days,
Marked alike with joy and care,
Memory holds each sacred token,
Victory and defeat we share.

“Step by step we’ve marched together,
Reached the goal we each have sought,
And to-day we meet, the hour
Both with pain and pleasure fraught.

“Books are closed, our tasks are ended,
School-days o’er—nay, just begun.
Life’s work meets us at the threshold,
Speaks its duties one by one.

“Let us then go on rejoicing
In the great work we’ve begun,
Until victory crowns our efforts,
And we hear the words, ‘Well done.’”

—ELIZABETH LOVENA HATFIELD.

THE Isabella Graham Hart Memorial Home was a blaze of light and festivity Thursday evening, June 23, upon the graduation of the Class of 1901 of the Nurses’ Training-School of the Rochester City Hospital. The class included the Misses Alice Lucille Wheaton, Maude Eunice Bayley, Jessie Morrison Waltre, Lilian Mabel Moore, Flora May Stevens, Mary Isabella Malloch, Lena Maud Bell, Margaret Jean Cameron, Mary Watt, Louisa Odans, Jessie Scarth Flett, Wilhelmina Williams, Mary Typhena Phelan.

In the absence of Mr. Henry G. Danforth, president of the Board of Directors, Mr. Charles P. Ford presided.

All the rooms on the ground floor had to be robbed of their chairs to accommodate the number of guests assembled in the large hall.

President Rush Rhees, of the Rochester University, opened the exercises with a prayer, which in itself should be a stimulus to the graduates in their future work.

Mrs. Henry Gold Danforth, in her usual happy way, then made the address of the evening.

Mrs. Margaret W. Giles added greatly to the pleasure of the evening with the song, “Spring Had Come.”

The exercises closed with the benediction, pronounced by President Rush Rhees.

The supper-table, in charge of Mrs. Richard D. Harlan, was set in the hall beneath the beautiful memorial window. Masses of white lilacs, shining silver, and tempting dainties made this a most attractive corner. The whole home was a perfect bower of flowers.

This class of thirteen, the last to graduate under Miss Palmer and Miss Smart, is one of which they may well be proud, and wherever each one may go will always be a lasting tribute to their efforts.

WESLEY HOSPITAL has been completed, and was informally opened June 17. For more than two years the members of the Chicago Methodist Preachers' Association have been trying to raise the money to build this hospital, the only one of its kind in Chicago.

The hospital, which stands on the lot at Twenty-fifth and Dearborn Streets, is adjacent to and connected with the Northwestern University Medical School, and was erected at a cost of two hundred and ten thousand dollars. It is the plan of the hospital and medical school to work in conjunction, and cases from the hospital will be taken to the school, where the professors can demonstrate before their classes. It is largely through the efforts of Dr. R. D. Sheppard, of Northwestern University, that the Methodists have at last secured the hospital, which they have wanted for a number of years. Work on the building was commenced two years ago, but through lack of money and labor difficulties many delays were caused. The first patients will be received in the new hospital about the first of July.

THE exercises connected with the graduation of the eleventh class of pupil nurses from the Training-School of the Hospital of the Protestant Episcopal Church in Philadelphia took place in the chapel at the hospital on June 25 at eight P.M.

Nineteen nurses were graduated: Misses Emily Allen, Charlotte M. Bietsch, Ottilie E. Dottir, Sara M. Dunsmore, Mary Humphrey, Laura D. Howard, Mabel A. Harrison, Blanche Knox, Barbara McLennan, Mary Morris, S. Maude Mutchler, Minnie A. Morgan, Margaret Nichols, Carrie M. Otto, Elizabeth C. Pfeiffer, Gertrude Rorke, Ida Z. Thompson, Lenora C. Williams, and Clara Wahl.

The bishop of the diocese presided. Order of exercises: Hymn; superintendent of hospital presented the graduating class to the bishop; bishop's response; responsive reading; prayer; Magnificat; St. Luke i. 46; presentation of diplomas; hymn; prayer for nurses.

THE new operating-rooms and adjoining anæsthetic- and wash-rooms at St. Joseph's Hospital, St. Joseph, Missouri, are now completed, and the first operation was performed there a few days ago by Dr. T. E. Potter. All in all, there are five rooms, which are connected by doors and hall-ways. The flooring in all is of tile, inlaid with ornamental figures on a white ground.

The large aseptic operating-room is very convenient, and both day and artificial light is as good as could be desired. In the centre of the ceiling there is a large skylight, and the windows on the east nearly take in the entire wall. The north and south light also is good. The big operating-table is provided with a glass top, and the dressing-tables are also covered with glass. The walls of the room are wainscoted with white and blue marble, and the general tone of the interior is a combination of light colors.

THE contract for the erection of the proposed Charlotte Williams Hospital, Richmond, Virginia, has been let. When completed it will be the largest institution of its kind in the South, with the exception of the Charity Hospital of New Orleans. The hospital will be thoroughly modern and up to date in every way. The furnishings and appliances will be of the latest design and of the most improved character. It is the intention of those interested to have the institution the most thoroughly equipped hospital in the South, to rank with any of the hospitals in the country.

The work on the construction of the new buildings, as has been stated, will be at once begun. The contract calls for its completion within a year and fifteen days.

THE nurses on duty in the Emergency Hospital at the Pan-American Exposition for the month of July were as follows:

Miss Jennie A. Warner, Garfield Memorial Hospital, Washington, District of Columbia.

Miss Mae McCulloch, Lansing Hospital, Lansing, Michigan.

Miss Harriet M. Carey, Buffalo General Hospital, Buffalo, New York.

Miss Maude Trueman, Royal Victoria Hospital, Barrie, Ontario.

Miss Florence Dodds, Lexington Heights Hospital, Buffalo, New York.

Mrs. Eunice W. Hughes, University of Maryland Hospital.

AN emergency hospital, its doors open day and night, with an automobile ambulance in constant attendance, will throw its portals open to the Los Angeles public before another winter season opens.

The Emergency Hospital Association was incorporated two weeks ago under the laws of California. It is hoped by the time the hospital is in readiness to receive patients that one hundred beds will have been endowed by the public.

The building will be of red re-pressed brick, with white terra-cotta trimmings, three stories in height and with the basement raised four feet above the sidewalk. It will be modern in structure and appointment and designed to accommodate three hundred and fifty patients.

THE commencement exercises of the graduating class of 1901 at Faxon Hospital, Utica, New York, were held in June at the institution. There were five members of the graduating class, Ivy Leontine Fairchild, Sara Ann Woglum, Florence Edith Peckham, Bessie Morgan Bowen, and Carolyne Palmer Tillotson. The exercises opened with prayer by Rev. E. H. Coley, followed by a bass solo by Harry Rowley. Rev. H. H. Tweedy then delivered the address to the graduating class. After the presentation of the diplomas the exercises closed with a duet finely rendered by Miss Dean and Mr. Rowley. The friends of the graduates then extended hearty congratulations and good wishes and an informal reception was held.

DIRECTOR OF CHARITIES COOLEY, Cleveland, Ohio, is preparing to have a special hospital for consumptives constructed on the City Infirmary grounds. For a long time the city has had set aside one ward in the City Hospital for this class of patients, but it does not now begin to accommodate those suffering from tuberculosis. The result is that they are scattered among the sick suffering from non-contagious diseases, thereby endangering the lives of many.

Director Cooley's plan is to have a separate building put up so that consumptives will not mingle with other patients at all. There is plenty of room on the grounds. He will have an architect draw up plans in a few days.

MISS ALICE A. GRISWOLD, who for the past nine years has been the very efficient superintendent of the Training-School connected with the Massachusetts Homœopathic Hospital, Boston, Massachusetts, has resigned her position and will leave the school September 1. Miss Griswold will be very much missed by both the hospital and Training-School, and her place will not be easily filled. The excellent standing of the school is due very largely to her conscientious, intelligent, and thorough work.

THE next meeting of the Association of Hospital Superintendents will be held in New York City on September 10, 11, and 12, with headquarters at the Murray Hill Hotel, on Park Avenue, from Fortieth to Forty-first Streets. There will be but one session a day, lasting from nine o'clock A.M. until one P.M., giving delegates an opportunity to inspect the magnificent hospitals of the great metropolis, as well as to visit the various sources of hospital supplies, of which New York is the greatest depot in this country, if not in the world.

THREE of the class in Hospital Economics who graduated this spring have already secured institution positions: Mrs. Mary V. Sullivan is to take charge of the preliminary course at the Johns Hopkins Hospital; Miss Annie R. Young assumed the duties of superintendent of the Muhlenberg Hospital, Plainfield, New Jersey, on July 1; Miss Ida R. Palmer is to teach the diet classes at the Albany Hospital, her engagement commencing October 1.

THE Lafayette Home Hospital Training-School, Lafayette, Indiana, graduated its first class of nurses June 12. The exercises were held upon the lawn in front of the hospital. The principal address was delivered by Dr. F. B. Thompson. At present the school numbers six pupils. In the autumn the number will be increased to ten. The Kile Memorial is rapidly nearing completion, and when it is finished the present hospital building will be utilized as a Nurses' Home.

THE graduating exercises of the Toledo Training-School, Toledo, Ohio, were held on the evening of June 4. The graduates were: Mrs. Minnie Williams, Mrs. Cecelia Brown, Miss Florence Horden, Miss Cora Needham, Miss Carrie Reed, Miss Eunice Hoffman, Miss Ira B. De Witt, Miss Jeannette Campbell, Miss Mabel Rood, Miss Catherine Morgan, Miss Charlotte Duncan, and Miss Carrie F. Penfield. An interesting programme was given.

MAY 30 was set apart as donation day at the Jewish Hospital, Philadelphia. The graduation exercises of the Training-School took place on the same day. Seven nurses were graduated, and the Matilda Kaufman gold medal was given to Miss Nellie S. French for the highest honors.

During the past year the Lucian Maas Home for Incurables has been completed.

MISS IDA V. SHEPARD, a graduate of the Boston City Hospital Training-School, Boston, Massachusetts, has taken charge of the Mary

Hitchcock Memorial Hospital, Hanover, New Hampshire. She fills the vacancy made by the resignation of Miss Theresa G. Leach, who had been superintendent of the hospital since it was opened some nine years since.

THE Lutheran Hospital Association, composed of all the Lutheran churches of the synods of neighboring States, has decided to establish a training-school for nurses in this city in connection with the magnificent hospital now being constructed by them at La Crosse, Wisconsin. The hospital is to be completed in a few months.

MISS L. L. DROWN, superintendent of the Boston City Hospital Training-School, Boston, Massachusetts, has returned from a vacation of more than three months. Miss Drown visited Southern California and many places of interest en route, and it is to be hoped that the change and rest will prove beneficial to her.

MISS MARY GRACE HILLS, superintendent of the Training-School and matron of the Central Maine General Hospital, Lewiston, Maine, has resigned her position, her resignation to take effect August 31. Miss Hills has been in her present position four years, and leaves to take up district work in Boston, Massachusetts.

WORK has been commenced on the Nurses' Home at the Taunton Insane Hospital, Taunton, Massachusetts. The building is to be of brick, three stories high, one hundred and seventeen feet long by thirty-eight wide. When completed it will have all modern improvements and will accommodate fifty nurses.

FIRE in the General Military Hospital at the Presidio, San Francisco, California, destroyed three wards, the kitchen, dining-room, and medical-supply room.

None of the patients was injured. The loss is estimated at twenty-five thousand dollars.

PLANS are being drawn for the large Nurses' Home to be built for the Chester Hospital at Chester, Pennsylvania. It will be a complete building with every possible interior appointment in that line. Estimates will be requested in about two weeks, and local builders will bid.

THE graduating exercises of the Northwestern Hospital Training-School for Nurses, Minneapolis, Minnesota, took place Thursday afternoon, June 20. Six young women graduated. At the close of the exercises an informal reception was given the nurses and their friends.

MISS AGNES P. MAHONY, superintendent of nurses of the Metropolitan Training-School on Blackwell's Island, New York, has resigned her position and is to take up missionary work in Western Africa, where she hopes to establish a training-school among the Liberians.

THE first annual commencement of the Training-School for Nurses in connection with the Allentown Hospital, Allentown, Pennsylvania, took place in the Lyric Theatre. Three nurses graduated. Dr. E. P. Davis, of Philadelphia, delivered the address.

THE fifth annual commencement exercises of the Training-School for Nurses of the County Hospital, Los Angeles, California, took place June 20, at eight P.M. Eight nurses graduated. The exercises consisted of addresses and music.

UNIONTOWN, PENNSYLVANIA, is to have a new hospital. The citizens of Uniontown must provide the site, and the Legislature has provided money to build the hospital and provide for its maintenance for two years.

THE corner-stone of the new Borgess Hospital, Kalamazoo, Michigan, was laid June 10. The ceremonies were in charge of Very Rev. Father O'Brien, of St. Augustine's Church, Kalamazoo.

THE Presbyterian Hospital, Atlanta, Georgia, is nearly ready for occupancy. It will be dedicated early in July. An order has already been placed for a part of the furniture.

MISS ELIZABETH L. PARKER has resigned her position as superintendent of the Lansing Hospital to accept the position of matron in the Michigan School for the Blind.

THE County Hospital at Wauwatosa, Wisconsin, is to have a new addition which will cost eighty thousand dollars. The work upon it is to be commenced at once.

THE first class to be graduated from the Lakeside Hospital School for Nurses in Cleveland held the first meeting of their alumnæ June 1.

ST. VINCENT Hospital, Norfolk, Virginia, has been completed and was opened April 20 with very appropriate exercises.

GROUND has been broken for the new addition to the St. Elizabeth's Hospital, Dayton, Ohio.

WORK was commenced May 22 on the new City Hospital, Sherman, Texas.

OFFICIAL REPORTS OF SOCIETIES

IN CHARGE OF
MARY E. THORNTON



THE CONGRESS OF NURSES

TRAINED NURSES' DAY AND THE TEMPLE OF MUSIC

THE Director-General of the Pan-American Exposition, Mr. W. C. Buchanan, has written to the chairman of the Buffalo Nurses' Association to say that on Trained Nurses' Day, Saturday, September 21, the Music Temple on the Exposition grounds will be reserved for the use of the nurses from one o'clock to three-thirty P.M.

A DELEGATE FROM THE UNITED STATES ARMY NURSE CORPS.

Assistant-Surgeon-General W. H. Forwood, Acting Surgeon-General, has informed the Congress Committee that orders will be requested directing the assignment of a representative of the Army Nurse Corps as a delegate to the Congress.

HOSPITALITY EXTENDED

Mr. J. Ross Robertson, president of the Board of Trustees, Hospital for Sick Children, Toronto, whose kindness and hospitality are proverbial, has written to Miss Snively that he will open the reception-room of the *Telegram*, on Bay Street, to our foreign visitors for attending to their correspondence, and for obtaining any information, and that his own secretary will be at their disposal.

PERSONAL

Miss Isla Stewart and Miss Waind expect to land in New York on September 7 or 8, and will spend a few days with Miss Brennan at Bellevue.

Miss Wood and Miss Hughes arrive on the 14th or 15th, and will stay at the Nurses' Settlement on their way to Buffalo.

DEFERRED MEETING

The New York State Association will defer its meeting until later in the fall, and due notice will be sent to the journals of the time and place decided upon.

THE NATIONAL COUNCIL OF WOMEN OF THE
UNITED STATES

At a conference of officers of the National Council of Women the following resolutions relating to a *Council Bulletin* were passed:

Moved by Mrs. Sewall and voted unanimously:

"That a *Council Bulletin* be published, and that not less than five numbers be issued before the next triennial.

"That Mrs. Spencer be appointed editor-in-chief of the *Council Bulletin*, with the privilege of employing a Providence printer, and with an Advisory Board to consist of the president, Mrs. Gaffney, Mrs. Cynthia Westover Alden, chairman of the Press Committee of the National Council, Mrs. Ida Husted Harper, chairman of the Press Committee of the International Council, and Mrs. Ellen A. Richardson, cabinet head of the Department of Art and Literature.

"That the committee on publishing the *Council Bulletin* shall be permitted to draw upon the treasury for a sum not exceeding one hundred and fifty dollars for the five numbers, and shall be allowed to use discretion as to the relative amount to be expended for the first issue, and that each issue shall consist of at least fifteen hundred copies."

The letter which was sent to the officers of the American Federation of Nurses (comprising the Superintendents' Society and the Associated Alumnae) relating to this proposed publication said:

"As appropriations from the council treasury for new work require the consent of the executive, and as the *Bulletin*, to be of use, must be issued in at least two numbers before the next meeting at Buffalo, the consent of the presidents of organizations within the council is asked by the officers for this action. Also, as each *Bulletin* will contain the names of all our affiliated bodies, with that of one officer with address, and may also give a line to each one (not to exceed ten words) stating object and numbers, and may if desired contain also date and place of the next meeting of that organization, it is certain that the benefit to each organization will entitle the officers not only to consent to the measure, but also to aid in making the expense to the council treasury as light as possible. The one hundred and fifty dollars voted is in the nature of a guarantee, and we hope will not have to be drawn upon. Already one hundred subscriptions for five numbers of the *Bulletin* at twenty-five cents for the series have been received, and the appended questions are sent to you in the hope that your reply will be a pledge of aid as well as a consent to what is proposed."

The first question was: "Do you consent to the issuing of *Council Bulletin* in accordance with enclosed resolutions?"

The second: "Will you subscribe for copies for your organization?"

The third: "If so, how many?"

To the above questions the secretary of the federation answered in the affirmative, giving the consent of the federation to the publication of the *Bulletin*. The second and third questions were not answered, as they must be decided at the business meetings of our associations.

The National Council of Women will meet in Buffalo on September 13, and the American Federation of Nurses is entitled to two delegates. The Executive Committee has asked Miss Keating from the superintendents, and Miss Sophia Palmer from the alumnae, and they have consented to serve.

NEW ENGLAND HOSPITAL ALUMNÆ

THE annual meeting of the New England Hospital Training-School Alumnae Association was held at the Nurses' Home on May 29. The following officers were elected:

Honorary president, Miss Linda Richards.

President, Miss Drusilla Hodgins.

First vice-president, Miss Louise Furber.

Second vice-president, Miss M. B. McIntosh.

Third vice-president, Miss Maren Wahl.

Treasurer, Mrs. Emma Wilson Smith.

Secretary, Miss A. Dillet.

Assistant secretary, Mrs. Louise B. Verette.

Advisory member, Miss A. C. Jaume.

Chairman of registry, Miss A. C. Jaume.

Registry Committee—Miss Sarah Beatty, Miss Dillet.

It was unanimously voted that "thanks be sent to Miss C. D. Noyes (ex-superintendent of nurses) for her hearty coöperation in the organization of the association and the registry, and her services as advisory member and chairman of the registry and registrar. We do hereby show our appreciation."

Letters from absent members endorse the above sentiments.

After the graduating exercises the Class of 1901 were entertained by the alumnae. As the weather was too rainy to hold the usual festivities on the hospital grounds, the doors of the spacious corridors where the nurses are located in the new surgical building were thrown open, and Japanese lanterns were suspended from the ceiling to brighten the gloom of the afternoon. A room was decorated with flags, etc., in which tables were laid and supper was served between six and eight. The staff and house officers were present, and all enjoyed a pleasant evening.

THE SPANISH-AMERICAN WAR NURSES

THE 1901 meeting of the Spanish-American War Nurses will be held in Buffalo, New York, September 16 and 17, immediately preceding the International Congress of Nurses. The change from Washington to Buffalo as the place of meeting has been decided on by the officers at the request of many members and with the approval of all whose opinions could be obtained.

The complete programme will be mailed to members soon, and those who have lately changed addresses are requested to notify the corresponding secretary and treasurer, Mrs. H. C. Lounsbury, 493 Quarrier Street, Charleston-on-Kanawha, West Virginia.

ANITA NEWCOMBE MCGEE,
President S.-A. W. N.

BROOKLYN MEMORIAL HOSPITAL ALUMNÆ

At the annual meeting of the Alumnae Association of the Memorial Hospital Training-School, Brooklyn, New York, the following officers were elected:

President, Miss M. J. Parry.

Vice-president, Miss V. Parbury.

Secretary-treasurer, Miss Clara Richard.

Miss M. M. Wallace, supervisor of nurses, was made honorary member of the society.

A committee was appointed to raise funds to furnish a room in the hospital, which will be known as the Alumnae Room.

A letter was read from Miss Botch, who is at present in Trinidad, Cuba, organizing a training-school for nurses.

PHILADELPHIA WOMAN'S HOSPITAL ALUMNÆ

THE Nurse Alumnae Association of the Woman's Hospital, Philadelphia, gave a "birthday party and tea" at 1515 Westmoreland Street on May 15 for the benefit of the "graduate nurse bed," the proceeds of which are three hundred and one dollars and seventy-three cents.

At the commencement of the Training-School in December last the alumnae representative presented to the hospital one thousand dollars, this being the first payment on the three thousand five hundred dollars required to endow a bed and furnish a room. The graduate nurses are now entitled to the use of a bed for three months in the year.

It is intended to give an illustrated lecture on "Summer Wanderings in Europe" in the fall.

A special meeting of this association was called on Tuesday, June 25, at the home of the president, 1515 Westmoreland Street, at which Miss Anna M. Peters was elected a delegate to the International Congress of Nurses to be held at Buffalo. The Misses Lillian L. Allen, Margaret McEwen, and Margaret L. White were elected alternates.

At the final account the proceeds of the "birthday party" were shown to be three hundred and twenty-six dollars and thirteen cents.

Seven names were proposed for membership.

After considering other business, adjourned to meet at 1227 Arch Street, September 11, 1901.

LONG ISLAND COLLEGE ALUMNÆ, BROOKLYN

A EUCHRE PARTY was held for the benefit of this alumnae on Wednesday, June 5, at "The Arlington." There was a large gathering of friends and a reunion of many of the members who had not met for a number of years, and a most enjoyable evening was passed.

After refreshments were served a number of very handsome prizes were awarded the successful players, several of which were the gift of Miss Milhan, a kind friend of the nurses, and they wish to tender her their thanks for her interest and help. They also wish to thank Miss Haines and the Entertainment Committee for their earnest efforts in making the euchre party a success, as the treasurer reports an addition in the treasury of over one hundred dollars.

The annual outing of this association was held in Prospect Park on June 13, the members meeting at the Park Plaza at three P.M. As the day was perfect, the park never looked more inviting, the refreshing green of the trees and shrubbery contrasting so beautifully with the bright and varied coloring of flowers of every description, from the simplest to the most highly cultivated, and as one of the nurses expressed it, "The park is indeed a fairyland of beauty at this season of the year."

We regretted very much the absence of our president, Mrs. Twing, and a number of the nurses, who found it impossible to enjoy the outing with us.

After a pleasant social chat Miss Sutcliffe announced that the time had arrived to have lunch served, so at once the tempting feast was spread under one of the fine old shade-trees, and it need not be said that the members were in excellent condition to do justice to the generous supply of viands.

The party then took a stroll to the different points of interest in the park, visiting the "Vale of Cashmere," and as we viewed it from the rustic bridge the sight was enchanting. We then saw the "Rose Garden." The beauty and fragrance of these choicest of roses we shall not soon forget. We also visited the "Italian Garden," with its large collection of tropical and home plants, and as we descended the stairs, either side of which is carpeted with variegated flowers to form the design, we could not but marvel at the perfection to which artistic gardening had come.

As the day came to a close we all felt benefited and refreshed by our pleasant reunion, and no doubt each one of us will long remember the happy day spent together.

THE Brooklyn Homœopathic Alumnae send greetings, more particularly to our sister nurses from abroad who are visiting us this summer.

Our alumnae was formed five years ago, and although we have accomplished some good work in the past, having had drills in parliamentary law, lectures in bacteriology, etc., we think that during the present year we have accomplished our most efficient work. The city having bought our hospital for the purpose of making it a charity hospital, our "alumnae" asked permission of the "Memorial Homœopathic Hospital of Brooklyn" to furnish a room for our sick members. Permission was granted, and a committee of four was appointed, Miss Potter, Miss Park, Miss Fanning, and Miss Griswold. The room is comfortably and prettily furnished, having cost the members one hundred and forty-four dollars. Two of the nurses donated books and a third a scrap-basket. We are so much encouraged with our small beginning that we hope in the not distant future we shall be able to raise among our "alumnae" members one thousand dollars and endow the room.

THE graduates of the Cooper Hospital, Camden, New Jersey, met on Wednesday, June 12, for the purpose of organizing an Alumnae Association. It was decided to hold quarterly meetings on the first Monday in January, April, July, and October at the hospital.

Officers elected:

President, Miss Ella Michaels.

First vice-president, Miss Effa Fahringer.

Second vice-president, Miss Nellie Hankins.

Secretary, Miss Irene B. Myers.

Treasurer, Miss Mary E. Rockhill.

On Friday afternoon, June 14, at Camden, New Jersey, an Alumnae Association was organized by the graduates of the West Jersey Institute for Training Nurses, assisted by the faculty and Nurse Committee of the West Jersey Homœopathic Hospital for Women and Children.

A constitution and set of by-laws were adopted, and the following officers were elected:

President, Mrs. Elizabeth K. Lawrence.

Vice-president, Miss Elizabeth Webb.

Secretary, Miss Mary A. Craig.

Treasurer, Miss Jennie B. Fix.

Executive Committee—Misses Lida M. Foster, Alice M. Greer, and Mary F. Parker.

The class secretaries appointed were Mrs. Emma J. Morgan, 1896; Misses Mary A. Craig, 1897; Jennie B. Fix, 1898; Alice M. Greer, 1900; Edythe E. Dunlap, 1901. Miss Mary F. Parker was appointed necrologist, and Miss Adeline W. Robson was elected an honorary member.

After a vote of thanks to the faculty and Nurse Committee for their assistance and to the Board of Managers for their entertainment, the meeting adjourned.

A dainty tea was served by the Board of Managers.

In the evening the fifth annual commencement exercises of the Training-School were held in the First Methodist Episcopal Church, at which the Rev. George B. Wight delivered an excellent address.

Dr. Wallace McGeorge, secretary of the Training-School, presented diplomas and conferred the degree of medical and surgical nurse upon the following graduates: Misses Edythe Estelle Dunlap and Mary Frances Parker.

Class pins were presented by the head nurse, Miss Adeline W. Robson, with fitting remarks.

Flowers and gifts were in profusion, and music was interspersed throughout the programme.

After the exercises a reception to the graduates was held in the hospital parlor, which was tastefully decorated with flags, flowers, and the school colors.

THE Press Committee of the Nurses' Congress has written to all the societies and Nurses' Clubs asking for short histories of the associations with biographies of delegates.

Such societies are also requested to send copies of reports, journals, constitutions, and any other printed matter to the collection of nurses' writings. Address Miss Damer, 55 Mohawk Street, Buffalo.

At a special meeting of the Executive Committee of the Alumnae of the Training-School of the Hospital of the University of Pennsylvania, held June 13, 1901, the following resolutions were adopted:

"WHEREAS, It has pleased our Heavenly Father to remove from our midst Miss Harriet H. Fetherman, an esteemed member of our association; therefore

"Resolved, That in her death our association has lost a highly esteemed and much loved member, and the nursing profession a faithful worker.

"Resolved, That a copy of these resolutions be extended with our deepest sympathy to her family, that a second copy be sent to THE AMERICAN JOURNAL OF NURSING, and that a record be made of the same in the minutes of this meeting.

"E. RAMSDEN,

"M. G. FAY,

"N. M. CASEY,

"Committee."

VISITING NURSING IN NEW YORK *

BY MRS. MERLE CARHART

Post-Graduate Hospital Training-School, New York

WITHIN the past three or four years there seems to have sprung up a considerable demand for the services of trained nurses to perform what has been called visiting or hourly nursing. It often happens that it is neither necessary nor desirable in certain cases for the patient to have the continuous presence of the trained nurse during the entire twenty-four hours of the day. In some families, even among the wealthy, an additional member of the household in a time of sickness is an inconvenience to be avoided, unless absolutely essential for the safety of the patient. If a visiting nurse can be procured to do those things which only a trained nurse can properly perform, maids and relatives can be depended upon to attend to the ordinary needs of the sick person. Of course, it is only a limited class of cases to which visiting nursing is applicable. We all recognize the fact that acute diseases of a serious nature should have the continuous care of a trained nurse to carry out the treatment of the medical attendant. In many medical cases, however, especially in those of a semi-acute or chronic course, the visiting nurse can attend to the daily bath, apply massage or electricity, give enemata, douches, or irrigation, see that medicines are properly taken; in fact, she can in an hour or two "do up" the invalid for the day, so that her absence at other times is not detrimental. She should usually arrange her visit so as to be present, for obvious reasons, when the doctor calls.

* Read at the Third Annual Convention of the Associated Alumnae.

In some surgical cases, also, the presence of the nurse at operations, when surgical dressings are made, or when special treatment is adopted may be all that is essential, provided additional care is possible from members of the family or friends.

For people living in boarding-houses and small apartments visiting nursing is eminently desirable, since there is often absolutely no place for a nurse to sleep. In addition, the comparative economy of visiting nursing is a factor of importance with people of small means, who might not otherwise be able to procure a trained nurse at all.

The need for visiting nursing and its success have some analogy to the need for and success of district and settlement work, about which we have been hearing.

The fact of visiting nursing in New York has not yet become well known among the laity, nor are its advantages appreciated by the medical profession. Both the laity and the doctors seem to recognize the need for hourly nursing when the idea is presented to them, but it has been the experience of the writer of this article that devotion to visiting nursing is often interfered with by demands for regular, continuous nursing. One doctor who gave great encouragement to the writer to devote herself to hourly nursing was quite indignant at her refusal to take a regular case, and never called her again for either regular or hourly work. In preparing this article the writer has corresponded with the few nurses whom she has found to be doing visiting nursing, and will now quote from some of the letters received.

Miss Mary L. Pring writes: "When I began, about a year ago, I visited many of the doctors, and although they all professed to be interested in hourly nursing and glad to hear there was such a nurse to call upon, in almost every case I never heard from them afterwards. Neither the doctors nor the laity seem to have gotten used to the idea yet, although I believe it will come with time." Miss Pring's experience was limited to a very few cases.

Miss Martha L. Janes thinks that "the subject does need to be brought more before the public. Even doctors who have had the matter brought to their notice forget about it. A patient of mine to whom I was recently speaking of hourly nursing said: 'Why, surely my doctor could not have known about this. That would have just suited my case two years ago, when I could not have a trained nurse all the time.'"

Mrs. Lester Wilson, a New York Hospital nurse, is one who has already made a success of visiting nursing, and she has sent the following contribution, which will be quoted in full, although covering some points already touched upon:

"I think that there is a great call for hourly nurses in a city or

village or any place. I have found that in a great many cases people do not require to have a nurse all the time, and a great many other people cannot afford to hire a nurse all the time, and that a nurse can go in, and in an hour or two can accomplish as much as a nurse who is there all the time, as far as actual care is concerned. Wealthy people do not care so much for the expense, but they do not want a nurse around all the time. They have maids in the house who can wait on them and do everything but the one thing that they call the nurse for, which is something that a maid would not be capable of doing.

"The training for hourly nursing should be the best. Just any nurse cannot satisfy people, by any means. Why people do not have a higher opinion of hourly nursing than they do is because some nurse who is too old or too tired, or for some reason or other has not succeeded very well at private nursing, has taken up hourly nursing. If really first-class nurses would go into it, they could make as much money as they do at private nursing, and would get a great deal more fresh air and exercise than they do now. I think it is a great deal pleasanter than private nursing. I certainly never did private nursing because I thought it was pleasant, but because I could not afford to do institutional work.

"I have so many nurses who come to me and say, 'I come to you because I know you have made a success of hourly nursing, and I want your opinion as to whether I had better take it up.' And then I ask them why they want to take it up, and nine times out of ten I find that it is because they have not made a success of private nursing; and I advise most of them not to go into it, because they are not fond enough of hard work. Anyone who is going into hourly nursing to make a success of it ought to just love hard work, and dirty work too. The trouble with a great many nurses is that they are so fond of sitting around with their hands folded.

"To make hourly nursing pay, too, a nurse ought to have a good deal of executive ability in order to plan her day and get it all to come out right.

"The charge for the work ought to be regulated according to the patient's ability to pay, just as a doctor regulates his charges. People who can afford to pay four dollars a day and the board of a nurse are quite willing to pay two dollars for a visit from a nurse if in an hour she gives them a bath or an irrigation, or does a surgical dressing and gets them straightened out for the day. I do not remember that I have ever had anyone object to the price that I charged them for hourly nursing."

Mrs. Lester Wilson has expressed herself very forcibly, and her ideas regarding the work are decidedly original.

In order to make a success of visiting nursing in New York, where

the idea has not yet been fully developed, registration in some nurses' registry seems essential, and perhaps it may be necessary occasionally to take regular cases for continuous work also, until a sufficient clientèle of hourly nursing is obtained. But in general the two kinds of work are conflicting, since one long case of continuous nursing puts a nurse out of touch with her other patients and makes her unavailable when called upon for hourly nursing.

From a financial stand-point visiting nursing is at least as remunerative as regular nursing if a good clientèle is obtained. The writer has at times made considerably more than four dollars per day. Of course, occasionally cases were few and receipts limited, but an average of three or four patients a day should support a nurse nicely, with the advantages of considerable leisure during the day and regular sleep at night.

As to rates, the writer considers one dollar for the first hour and twenty-five cents for the ensuing hours are probably all that people of limited means, constituting so large a proportion of the patients in hourly nursing, can afford to pay. Perhaps the second hour should usually be fifty cents, as suggested by Miss Martha L. Janes, with whose ideas in the following quotation the writer agrees in the main. She says:

"Our registry at first voted to have the rates for hourly nursing one dollar for the first hour and twenty-five cents for each ensuing hour till the usual price per day was reached.

"After my second case I was fully persuaded that the price for ensuing hours should be fifty cents instead of twenty-five cents. In the majority of cases the extra twenty-five cents is so little that the nurse will be kept that length of time,—I mean for two hours, anyway,—and by the time car-fare is paid almost nothing remains for the hour's work, and very likely a good part of another hour will be consumed in getting to the next patient or to one's room."

In conclusion, the writer thinks that visiting nursing has a future of success before it, and that it has many advantages both for patient and nurse.

The advantages for the patient have been sufficiently dwelt upon. For the nurse it gives varied and interesting work, in many ways pleasanter than regular continuous nursing; it furnishes fresh air and exercise, and is therefore healthier than confined work in private nursing; it insures sleep at night and regular habits, and is therefore more comfortable as well as healthier; and, lastly, it is with a good clientèle fully as remunerative as regular nursing, besides giving greater freedom of action and mode of life. As its advantages are better known it is sure to be taken up more and more by successful nurses.

FOREIGN DEPARTMENT

IN CHARGE OF
LAVINIA L. DOCK



ORGANIZATION NOTES

THE LEAGUE OF ST. JOHN'S HOUSE NURSES

A MEETING to inaugurate a League of St. John's House Nurses was held at St. John's House, Norfolk Street, Strand, London, on Saturday, June 15. This is the second league to be formed in England of the nurses of one school, corresponding to our *alumnæ* associations.

St. John's House is an interesting institution, founded in 1848 much on the Kaiserswerth lines, and some of the St. John's sisters went to the Crimea with Miss Nightingale.

The sister superior said in her address in part:

"There are two great objects set before us for the *raison d'être* of our league: first, to keep up a high standard of ethics in the nursing profession, and, next, for mutual help and pleasure. Work in the first place, for we pledge ourselves to promote in every way we can the many interests of our profession, and this involves hard work. And pleasure follows, for there is no pleasure so real as that which comes to fellow-workers in the self-same cause when they can meet together and feel, as well as speak, the joy which comes from united coöperation in the same work."

The objects of the league are:

(a) To elevate and strengthen the profession by endeavoring to maintain a high standard of work and conduct.

(b) To bring about a uniform system of education, certification, examination, and State registration for British nurses.

(c) To promote the usefulness and honor, the financial and other interests, of the nursing profession.

(d) For mutual help, sympathy, and pleasure.

The membership qualification is the certificate of three-years' training, after examination, in a general hospital of not less than fifty beds.

To cover such as were trained in a former less period of time, it is provided that for two years to come nurses who had the shorter training may be elected into membership.

The league intends to publish a half-yearly journal, containing names and addresses of members with their official positions, and items of interest.

OUR FOREIGN EXCHANGES

It is with much pleasure we have received the *Nurses' Journal*, the organ of the Royal British Nurses' Association.

We are immediately interested in the Nurses' Settlement which the members of the Royal British Nurses' Association are planning, and would like to know

more about it. It is, evidently, not what we call a Nurses' Settlement on this side, where this name is applied to the coöperative living of a group of nurses who wish to combine a participation in the social life of a neighborhood with district nursing or with independent pursuits, but rather seems to be a plan for club life, without the restrictions of a "home." As the *Journal* says: "In the Nurses' Settlement every care will be taken to procure complete liberty for the residents; each lady will have her own furniture, books, and plants; her own friends, her own opinions, and her own latch-key, probably her own cat. The aim is to provide a pleasant environment, remove all landlord difficulties, and enable the nurse members of the association to live, each as pleases her best, in the independence of thought and action for which the whole tenor of their lives has predisposed them.

"It is desired to build quarters for twenty nurses, in which they may live as independently as in lodgings, but with all the comforts of home life. Each inmate will be required to have a small income of her own, as no board will be provided."

We are also glad to receive the *Danish Nursing Journal*, the last number of which contains the annual report of the Danish Nurses' Association. We hope soon to have an abstract made of this report.

The *Nursing Record* has devoted considerable space in several numbers, ending with that of June 15, to an exhaustive review of a thesis by Anna Emilie Hamilton, M.D., a French woman, entitled "Considerations sur les Infirmières des Hôpitaux." The review has been most interesting, and this full and serious thesis, being indeed a monograph upon the nursing of Continental hospitals, must be of extreme value, and though written by a medical woman, and so not strictly included among books written by nurses, we shall hope to obtain a copy of it to present in our exhibit of books and papers at the Congress.

We quote the concluding remarks of the *Nursing Record*:

"The conclusion forced upon us from studying this most interesting thesis is that nursing in French hospitals is far behind that in many other European countries, notably Great Britain, Germany, Holland, and Sweden. There is also reason to fear that it will be some time before the standard of nursing in France attains to the level of these more progressive countries, inasmuch as the question closely involves that of religion and religious orders. It is only necessary to visit Holland and Belgium to see that the nursing of hospitals in the hands of religious orders, as is the case in Belgium, is immeasurably inferior to the standard in Holland, where lay nurses are employed. The position in France is much the same as that in Belgium, and it is probable that in both these countries we shall have the sad spectacle of the good done by scientific medicine minimized or spoilt in hospital treatment until the scientific aspect of nursing is recognized. We look forward with much pleasure to hearing the report which Dr. Hamilton is preparing on the present condition of nursing in France for presentation to the International Council of Nurses at Buffalo in September."

The interest of this report and of the comments of the *Nursing Record* is heightened by the fact, just come to the knowledge of THE AMERICAN JOURNAL OF NURSING, that the new director of the "Assistance Publique" of Paris is having a report prepared on hospital nurses in the United States, England, and Germany, towards the preparation of which report material is now being obtained descriptive of the systems of nursing in these countries

LETTERS

MISS TURNER, a graduate of Bellevue Hospital, writes from Las Animas Hospital, Cuba:

"This hospital is designed for all contagious diseases, but we get more yellow-fever than anything else. During 1900 we had about two hundred and seventy cases, and two-thirds of them were Americans. A great many Spaniards have yellow-fever, but most of them are treated in the Cuban hospital.

"You people of the North think yellow-fever is much worse than it really is. A bad case cannot, it is true, be much exaggerated, but there are many light cases, and there are other diseases having a higher death-rate, the worst of which is tuberculosis; never advise any one with phthisis to go to Cuba, for they would not live long. October and November were our worst months. We then had a large number of cases, and the disease seemed to be of a more malignant type.

"The ward work is very hard and trying. Each ward contains several small rooms, and yellow-fever patients must be constantly classified and the milder cases kept separated from the more severe ones. Before death they are nearly always delirious, and we give them single rooms, have boards at the side of the bed, and a man constantly sitting beside them. Each case is like a case on private duty, and the treatment cold water, very little medication being used. Every patient has a cleansing bath each morning and clean linen. For a week, more or less, no milk or nourishment of any sort is given, as the stomach usually will retain nothing. Then we begin with half an ounce or an ounce once in three hours. If that is retained we increase gradually. Beef tea is given in case there is no albumen in the urine. We also give them ice-cream, and when they begin to eat they are fed about like typhoids. Every patient must take plenty of water in order to keep the kidneys well flushed. They can have plain ice-water, limeade, Vichy, Apollinaris, almost any mineral water, and ginger ale, the idea being to get them to take as much fluid as possible. When they come in they have a large dose of castor-oil or calomel and jalap, and afterwards an enema daily until the worst of the disease is over.

"During the early stages, when there is much pain, we frequently give five grains of phenacetine; then they have ice-caps to the head, hot-water bags wherever they are wanted, mustard pastes over the epigastrium for nausea, and ice-sponges or ice-water enemata whenever the temperature reaches 103°. If the urine is deficient, saline solutions are given per rectum, six ounces every four hours.

"The charting work is enormous, as the most minute thing is recorded. Every ounce of water given must be put down, with the time. Urine is measured and recorded, and a specimen saved daily until convalescence is established. It is examined in the ward, that no mistake may be made, and tubes are labelled, corked, and saved for comparison. Night records are kept in red ink up to seven A.M. All excreta from patients is carried to a crematory and nothing emptied into the plumbing.

"The hospital is under the control of the Sanitary Department, of which Major Gorgas is the head. We think he is the best man alive. Last year he personally looked after every detail, and we were happy, no matter how hard

the work. He was never too busy to attend to the smallest detail or to try and right everybody's wrongs, and is the most unselfish humanitarian.

"Just now all the yellow-fever experts are wild over the mosquito and expect to carry on their experiments here. None of the *Culex* mosquitoes are found here, so they are imported for experimental work. Our wards are all most carefully screened, as the doctors believe that the disease is propagated by the mosquito.

"We nurses do not fear the disease at all, and believe the risk is no greater than in nursing typhoid. Eight out of our twelve nurses were non-immunes, and most of our help, yet no one contracted it. Every nurse who has the opportunity should do some yellow-fever work, as it is most interesting. A nurse who has had experience can easily diagnose a well-marked case anywhere. The odor alone is diagnostic, though some doctors say they do not notice it."

A WEST INDIAN HOSPITAL

THE notes following are taken from a letter from Miss Louise Greenwood, of Buffalo:

"In the beautiful little island of Barbadoes, the most eastward of the Windward group, there is one of the oldest and largest of West Indian hospitals. It was named for the late Queen Victoria, and was built about sixty years ago, when she was just beginning her reign. It stands overlooking the sea, on Hastings Road, in the outskirts of Bridgetown, the capital of the island.

"Barbadoes belongs to England and was settled by the English in 1605. It is the head-quarters of the British army and navy in the West Indies, and some regiments of redcoats are always to be seen in the town, with a naval vessel or two in the harbor. The Victoria Hospital is a large stone structure, surrounded by a high stone wall, which gives it an appearance of dignity fully borne out by the old colored porter at the door, dressed in red and blue uniform. The visitor is treated with much courtesy and conducted to the resident physician, who shows one over the hospital.

"The two hundred and thirty-six beds are invariably filled, a majority of the patients being colored. There is a training-school for colored women nurses, superintended by a nurse from one of the New York hospitals. The pupils are not taught to take temperatures or give hypodermic injections, and this naturally throws more work on the resident physicians.

"The junior resident was a graduate of one of the Philadelphia medical schools and had had post-graduate work in New York.

"Elephantiasis is a common disease among the colored people in hot climates, and a number of cases in the wards were so bad as to require amputation of both legs. One sees many patients on the streets with one or both feet and legs swollen to three times the natural size."

ST. LAZARUS'S DAY HELD AT THE LEPER HOSPITAL, MANILA

THOUSANDS of the friends and relatives of the lepers now confined in San Lazaro Hospital availed themselves of the opportunity to visit the patients on St. Lazarus's Day. This is the only day in the year when outsiders or the general Filipino public are admitted. The privilege is in commemoration of Lazarus, the Scriptural beggar, who is the patron saint of the hospital.

The hospital is situated on Calle Cervantes. So crowded was the road with the stream of natives that one was compelled to jostle his way through. On entering the outer gate the usual crowd of halt and maimed were found begging, imploring the passer-by in heart-melting tones to spare them a penny, for God's sake.

Inside the visitors were compelled to keep moving continuously in order to prevent a blockade in the halls, so numerous was the crowd. The cots of the patients were littered with cigars, cakes, sweetmeats, and coppers, contributions from the visitors who took pity upon the sufferers. Some of the patients seemed to be comparatively happy, while others had a look of settled melancholy upon their faces. One man who had been brought in from the provinces a week or two ago, and had not seen his wife or little child since, went into a transport on meeting them again. He hugged the little one to his breast repeatedly until seen by Dr. Sanderson, who is in charge. The doctor ordered him to lay the child down, explaining the danger of infection.

There are in all about eighty leprous patients in the hospital. Dr. Sanderson's plan is to keep their minds occupied as much as possible, and to introduce variety, both in diet and manner of living, as he believes that the monotony of a fish and rice diet and a general stagnation of existence are largely accountable for the generation or propagation of the disease. Partly to avoid this each patient is supposed to do two or three hours' work each day. The doctor expects to be able to promote his plan more fully and more perfectly in the leper island which is to be occupied before long.

Dr. Sanderson has signified his willingness to take charge of the government's leper colony when the time is ripe. It is his intention to introduce his class system there, and by every means to promote the welfare of the lepers. The doctor is optimistic regarding the work. He goes into it solely from a conviction that the leper colony presents a field wherein a man may do good and help his fellow-men.

It may be wondered at that the authorities permitted the meeting of the lepers and their relatives yesterday, but after discussion it was decided that at this season it might be inadvisable to go counter to the time-honored custom of the people. Only those who have violated the "costumbre" can realize the power which this fetich holds over the Filipino people.



EDITOR'S MISCELLANY



CHICAGO HOSPITAL SCHOOL

A MOVEMENT of much interest to educators and physicians is the founding of a new school in Chicago, known as the Chicago Hospital School. The school is designed to meet the needs of slightly defective children and those prevented by physical ailments—nervousness, sickness, slight defects of hearing, speech, etc.—from studying with ordinary children. Such a school is greatly needed, as there has never been sufficient provision for the education of this class of children.

One department in particular of the work undertaken by the school is expected to be of great scientific value. That is, the experimental study of the psychology of abnormal and sub-normal minds. This work is carried on under the supervision of the University of Chicago, and the medical work under Rush Medical College, with which the school is affiliated. A very thorough system of tests, measurements, and examinations is followed, and daily records are kept by each teacher and nurse of the progress of each case brought into the school. Many prominent physicians think that these studies will add much to the knowledge of the proper treatment of such children and to psychiatry of abnormal psychology. No such thorough study along these lines is being carried on elsewhere, and the University of Chicago is the first university to recognize the value of having such a school associated with it and working in connection with its departments of psychology and pedagogy.

The physicians and teachers interested expect to see the school grow rapidly, as there is a large field for its work. Among the features added is a training-school for nurses and teachers for this particular class of children.

[We hope that this training-school for nurses is in the nature of a post-graduate course for regularly trained graduates of a general hospital, as it would be a grave mistake to "train" nurses in such a specialty alone; it should be added to a previous general training.—Ed.]

The founder and head of the school is Miss Mary Campbell, a former student at the university. The chief of the school's medical staff is Dr. Nicholas Senn, of Chicago.—*Charities of July 6.*

THE English Committee of the Distress Fund for South African Women and Children has published the report made to it by Miss Emily Hobhouse, who went to Africa for the purpose of examining the camps of women and children there.

It may not be generally known that for some time past a form of the same horrible system which became notorious in this country during the Spanish-American War as the "reconcentration" practised by Weyler in Cuba has been established under military supervision in South Africa; namely, that the women and children taken from their homes are concentrated in huge camps, where they necessarily undergo every form of suffering.

It was generally supposed that only a monster like Weyler, who was seldom called anything but "butcher" in American papers, could perpetrate such a system. What must we think when we hear of the same cruelties in South Africa, with no voice raised in protest save of a few isolated civilians?

The extracts from Miss Hobhouse's report, as given in the *Nursing Record*, fill one with horror and aversion.

But something more than the "system" is to be blamed. Behind every system are persons, and those persons are responsible. Back of it all stands the responsibility of the mother and the educator. When will all mothers teach their boys tenderness for the weak and suffering? When will women as a whole cease adoring brute force and learn to love a nobler ideal?

How ridiculous to persist in the delusion that war can ennoble the character, and that the "soldiers of civilization" do not war upon women and children. We counsel all who still cling to the romantic ideals of the Middle Ages to send for Miss Hobhouse's report and read it carefully.

SEVERAL inquiries having been made regarding the work of "The Consumers' League," we are asked to say that the national secretary, Mrs. Florence Kelley, Charities Building, 105 East Twenty-second Street, New York City, will at any time send information, leaflets, reports, or will answer questions addressed to her.

In a former issue a correspondent drew attention to the widening circle of the nurse's work and the demands made upon her to take up related but not strictly professional interests. Mrs. Henry Gold Danforth, in her recent talk to the Rochester City Hospital graduates, voiced the same idea. In speaking of what she calls "Nursing Citizenship" she says:

"Our citizenship is our relation to the world of men and things around us, our value as members of the community, and in doing community work not our immediate individual task. At first sight, perhaps, it may seem as though of all professions that of nursing were most, by its nature, excluded from outside affairs. In its beginnings it may have been so, though even if the influence of the village neighbor who had the knack for nursing were studied, perhaps it would be found to have gone far beyond the four walls that saw its exercise; but with the change of methods, with the new knowledge of the nature, means of propagation, and means of prevention of disease, and its proper care, every nurse who goes out from a training-school becomes an educator in these matters for just those portions of the public who do not read medical journals and who skip the contemporary reviews. More and more on every side trained service is being called for in public stations where such a thing was unthought of but a little while ago, and this demand will increase in proportion as the women who are called on to meet it prove by their personal adaptation and worth the value of intelligent skill."

RECOGNIZING the new importance which mosquitoes have recently assumed in the eyes of scientists and sanitarians, and that the general public is fast coming to recognize the fact that these insects, formerly regarded as mere excuses for displays of more or less irritable humor, are now viewed as dangerous enemies, the Division of Entomology of the Department of Agriculture has issued a monograph which will be of much assistance in the campaign now beginning against the little creatures in many places. The use of screens over windows and beds is advised as the best means of protection against mosquitoes and the diseases of which they are the carriers, but more energetic measures, tending towards the extermination of the tribe, at least in restricted areas, are earnestly

recommended. The burning of cones, made of moistened pyrethrum powder, gives great relief from the attacks of mosquitoes in a room, but it does not kill the insects, and is only a palliative. Mosquitoes found on the ceiling of a bedroom may be killed easily and quickly, it is said, by placing under them a shallow tin vessel nailed to the end of a stick and moistened on the inside with kerosene. But the most satisfactory means of fighting mosquitoes is to destroy their larvæ or abolish their breeding-places by draining ponds and marshes, by stocking pools with fish, and by the use of kerosene on the surface of the water. Approximately, an ounce of the oil to every fifteen square feet of surface is sufficient, and generally the application need be made only once a month. The departmental scientist doubts, however, that this treatment can be effectually applied to salt marshes of large extent. He notes, however, that there need be no hesitation in covering with oil the surface of water used for drinking, so long as the supply is drawn from the bottom of the tank or pond, and a considerable amount of water is always left behind. The only way to free a district of mosquitoes is by concerted action by everybody living in it. For one man to attack the insects on his own land does little good if his neighbors permit the supply to be kept up.

MISS FLORENCE D. FULLER, 110 St. Felix Street, Brooklyn, writes to us concerning the too Bohemian existence of many nurses, and is desirous of starting a club-house for nurses in Brooklyn. Her idea is excellent, and no doubt she will be interested in the mention of the Nurses' Settlement in the foreign news. We are disposed to think that nurses are working out this matter of comfortable and civilized living pretty well for themselves, and that, in fact, no one can do it but themselves. We see a vast difference in the last seventeen years between the forlorn and even squalid "hall room" occupied by the private-duty nurse, where she washed her handkerchiefs in one corner and boiled chocolate in another, and the charming flats of to-day, where four or six nurses have their cosy little home, or the club-houses of New York, Baltimore, and Chicago, with comfortable rooms and a well-kept table.

The one complete failure of a club-house that we know of was one where the management was attempted by a board of philanthropic ladies, with the result that the nurses lost all the money they had invested, and have apparently no prospect of ever being recouped:

"It's so easy to fall into that rather Bohemian existence which does not tend towards the building of character or towards the gracious repose of manner so essential to the success of a nurse. I have noticed more than one ambitious girl, starting out with high ideals and hopes of attainment, drop to the level of mediocrity. I have interpreted this as the result of not having the stimulant of cultivated home life. Freed from long hours of arduous confinement, often accompanied by great anxiety, a restlessness ensues, making every approaching footstep a possible call to again start forth and accommodate herself to the ways of strangers. To help overcome this, she travels about somewhat independently, acquiring a manner not always acceptable in the sick-room, and thereby lessening her chances of professional success.

"It is right to seek diversion. The constant demand upon mental and physical resources makes it imperative she should devote the hours of relaxation to such recreation as will repair her depletion of mind and body. But how shall she cultivate the gracious feminine qualities which she sometimes shows danger of losing through contact with the stern realities of her professional duties when

her home life gives little more than the necessities of meagre existence? She is unable to make for herself the kind of home she ought to have,—not because she is not capable, but because she must be free. Why may we not band together and have a residential club-house, and employ a competent head to manage it for us?

"I hope some friendly voice will be raised at the coming Congress which will incite more interest in developing the home life for nurses."

IN answer to our inquiry Dr. Flexner, formerly of the Johns Hopkins Hospital and now at the University of Pennsylvania, writes us as follows:

"Much interest has been aroused within the past few weeks on account of the establishment by Mr. John D. Rockefeller, of New York, of an Institute for Medical Research, which is to bear his name. The endowment of the institute is for the present placed at two hundred thousand dollars, this sum to be expended, not for buildings or equipment, but for the support of research in medicine. The plan adopted is to utilize several laboratories already established in connection with a number of the leading medical schools for the conduct of the investigations. The institutions which have received grants from this fund include Columbia, John Hopkins, University of Pennsylvania, University of Michigan, and McGill University. Hitherto there has been a deficiency of productivity in the American laboratories designed for carrying on research in medical science chiefly on account of the limitation of funds with which they have had to contend. In this country, where the support of educational institutions is left to private inclination and benefaction, great difficulties have been encountered in providing adequately out of the slender means placed at their disposal.

"Hence it is that the European laboratories, maintained through national or municipal support, have contributed much more largely to the promotion of medical science. It is therefore a matter of congratulation that so large a gift is available for immediate use in promoting American research in medicine, and the future has been rendered more hopeful by the possibility of the eventual establishment by Mr. Rockefeller of an institute to rank with the Pasteur Institute, of Paris, and the Koch Institute, of Berlin, to be devoted exclusively to the extension of knowledge in scientific medicine."

A LETTER ON TEACHERS' COURSE

DEAR EDITOR: To those who contemplate taking the course in hospital economics at Teachers' College a word from one who has recently completed the course may be of interest.

The name "Hospital Economics" is in a measure misleading. One naturally infers that the instruction given is especially intended to fit nurses for the position of hospital superintendent, while in reality the object seems to be to teach superintendents of training-schools for nurses how to teach; to give a more thorough knowledge of those branches which are only superficially taught in training-schools; to broaden the mind and to give a deeper interest and keener appreciation of what is going on outside the little world in which the life of a nurse is necessarily spent.

To the writer the classes in physiology, methods of teaching, and bacteriology are worth her work, but at the beginning of the year so much time

was given to the courses in domestic science and psychology that seemed to have no direct bearing upon our professional work that it was to a certain extent disappointing.

While the course in domestic science is very fine, nurses who wish to fit themselves for diet-school teaching would save time and money by taking a course in a regular cooking-school.

The lectures on hospital management and the visits to the different hospitals in New York were most interesting. In no other city in the country can there be seen such a number of hospitals with an equipment representing every degree of economy and wealth, and while executive ability and business qualifications cannot be taught theoretically, this department of the course is of especial value to the woman who hopes to become a hospital superintendent.

It may save much disappointment if it is understood that this is not as yet a special course; the nurses become members of the regular classes, composed principally of women who are preparing to teach and of teachers who are taking special courses.

To the woman who has been engaged in practical nursing for a number of years this seems at first rather formidable, but any nurse of good general education who is fairly well read soon acquires the "study habit," and will be able to compete favorably with the other members of the class. Those branches which have direct bearing on her professional work are taken by her with greater ease than by the average woman.

There are many changes and improvements necessary before the course will be entirely satisfactory. The teaching of nurses is so different from the ordinary teaching of school-children that until the course can be made a special one it will necessarily cause some disappointment, but in order to make this special course a recognized department of Teachers' College a sum of money must be raised.

It would seem somewhat unjust that this course should depend on the Superintendents' Society alone for its support. It properly belongs to the nursing profession at large to give it such financial support as shall secure to the training-schools of the future superintendents who are thoroughly qualified to teach and administer.

Is it too much to ask that the thirty thousand nurses in the United States should endow the chair in hospital economics at Teachers' College, the actual cost to each being only \$1.66 $\frac{2}{3}$?

IDA R. PALMER,
Graduate Newport Hospital, 1891.

Miss Palmer's letter should be read in connection with the appeal for the Teachers' College Course in the Education Department. Her suggestion is a good one, and should interest many nurses, though we doubt much that thirty thousand will ever respond to it, or, indeed, to any one thing.

One might say that the distinction she draws in her comment on the name "Hospital Economics" is in reality not much of a difference, and many educators would not agree to her assumption of the comparative uselessness of psychology, the study of which should lay the basis of all successful teaching methods by giving insight into the minds and personalities of others. This sympathetic insight is distinctly not cultivated by the somewhat military routine and disciplinarianism so necessary in much of our work. Perhaps it could be gained in some other way, and much of psychology does sound queer, not to say weird.

CHANGES IN THE ARMY NURSE CORPS



CHANGES IN THE ARMY NURSE CORPS RECORDED IN THE SURGEON-GENERAL'S OFFICE FOR THE MONTH ENDING JULY 6, 1901

BARKLEY, MARY, formerly on duty at the General Hospital, Presidio, San Francisco, California, discharged.

Boyson, Alice M., transferred from the General Hospital, Presidio, San Francisco, California, to the General Hospital, Fort Bayard, New Mexico.

Bartholomew, Annie M., transferred from the Second Reserve Hospital, Manila, to duty at the Military Hospital, Dagupan, Philippine Islands.

Church, Emma, formerly on duty at the Santa Mesa Hospital, Manila, discharged.

Cowan, Dr. Isabel Eliot, formerly chief nurse at the General Hospital, Presidio, San Francisco, resigned July 1.

Duckworth, Lottie B., recently temporarily serving at the General Hospital, Presidio, San Francisco, discharged.

Dunn, Margaret S., formerly on duty at the General Hospital, Fort Bayard, New Mexico, discharged.

Earhart, Cecelia, arrived in San Francisco June 27 from Manila. After two-weeks' temporary duty at the General Hospital, Presidio, to be discharged.

Eliner, May C., recently on temporary duty at the General Hospital, Presidio, San Francisco, discharged.

Erickson, Theresa, formerly on duty at Santa Mesa, Manila, arrived in San Francisco June 26 to report for discharge.

Fenwick, Hattie, recently temporarily serving at the General Hospital, Presidio, San Francisco, discharged.

Friton, Emily, relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, May 23 and transferred to the Second Reserve Hospital, Manila, Philippine Islands.

Gertsch, Bertha M., transferred from the First Reserve to the Second Reserve Hospital, Manila, Philippine Islands.

Gillen, Mrs. Ella M., formerly on duty at Columbia Barracks, Quemados, Cuba, discharged at her own request to accept an appointment in the government service in Washington.

Gottschalk, Helene M., formerly on duty at the First Reserve Hospital, Manila, arrived in San Francisco June 9 and has reported for discharge.

Hasson, Esther V., formerly on duty at the Second Reserve Hospital, Manila, Philippine Islands, arrived in San Francisco June 27. After three-weeks' temporary duty at the General Hospital, Presidio, will report for discharge.

Hine, M. Estelle, recently arrived in Manila and was assigned to duty at the Convalescent Hospital, Corregidor Island, Philippine Islands.

Howard, Carrie L., transferred from the General Hospital, Presidio, San Francisco, California, to duty at the Post Hospital, Fort Sam Houston, San Antonio, Texas.

Kell, Elizabeth, transferred from the General Hospital, Fort Bayard, New Mexico, to the Post Hospital, Fort Sam Houston, Texas.

Kemmer, Alice S., relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, May 23 and ordered to the Santa Mesa Hospital, Manila.

Killiam, Lena E., relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, May 23 and ordered to the First Reserve Hospital, Manila.

King, Ella B., transferred from the Santa Mesa Hospital, Manila, to the Military Hospital, Dagupan, Philippine Islands.

Larsen, Jennie E., formerly on duty at Convalescent Hospital, Corregidor Island, Philippine Islands, arrived in San Francisco June 25 and assigned to temporary duty prior to her discharge.

Lasswell, Ida H., relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, May 23 and assigned to duty at the First Reserve Hospital, Manila.

Lewis, Winifred, formerly on duty at Columbia Barracks, Quemados, Cuba, discharged.

Lyons, Mary V., formerly on duty at the General Hospital, Presidio, San Francisco, California, discharged.

McCord, Harriet L., formerly on duty at the Military Hospital, Nagasaki, Japan, arrived in San Francisco June 26 to report for discharge.

McCurdy, Frances V., formerly on duty at Second Reserve Hospital, Manila, Philippine Islands, discharged. She is suffering from chronic articular rheumatism.

McGee, Anna M., formerly on duty at the General Hospital, Presidio, San Francisco, discharged.

McRae, Henrietta, relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, May 23 and assigned to duty at the First Reserve Hospital, Manila.

Meech, Marietta L., from temporary duty at the General Hospital, Presidio, San Francisco, assigned to permanent duty there.

Moshier, Maud, formerly on duty at the First Reserve Hospital, Manila, arrived in San Francisco June 9 and has reported for discharge.

Page, Lottie M., formerly on duty at the Second Reserve Hospital, Manila, discharged. Married in the Philippines.

Rector, Josephine, serving temporarily at the General Hospital, Presidio, San Francisco, under orders to return to the Philippines.

Reed, Augusta G., formerly on duty at the First Reserve Hospital, Manila, Philippine Islands, arrived in San Francisco June 26 to report for discharge.

Richmond, Edith L., recently arrived in Manila and assigned to duty at the Second Reserve Hospital.

Rourke, Louise R., transferred from the First Reserve Hospital, Manila, to Military Hospital, Vigan, Philippine Islands.

Salsbury, Elizabeth R., formerly on duty at the Santa Mesa Hospital, Manila, arrived in San Francisco June 26 to report for discharge.

Smith, Stella, recently arrived in Manila and assigned to the First Reserve Hospital.

Spear, Eliza B., transferred from temporary duty to permanent duty at the General Hospital, Presidio, San Francisco.

Sweet, Agnes, transferred from temporary to permanent duty at the General Hospital, Presidio, San Francisco, California.

Talcott, Mary B., transferred from temporary duty at the General Hospital, Presidio, San Francisco, to duty in the Philippines.

Thacher, Clara, on duty at the General Hospital, Presidio, San Francisco, under orders for duty in the Philippines.

Tweed, Rose A., formerly on duty at the First Reserve Hospital, Manila, transferred to duty as chief nurse at the General Hospital, Presidio, San Francisco, July 1.

Underwood, Eleanor, transferred from duty at the Convalescent Hospital, Corregidor Island, Philippine Islands, to the General Hospital, Presidio, San Francisco.

Weir, Mary Jane, on duty at the General Hospital, Presidio, San Francisco, California, under orders for duty in the Philippines.

White, Ellen L., formerly on duty at the General Hospital, Presidio, San Francisco, discharged.

Wills, Edith M., transferred from the First Reserve Hospital to the Second Reserve, Manila, Philippine Islands.

Winslow, Minnie A., formerly on duty at the General Hospital, Presidio, San Francisco, California, discharged.

Wiedmann, Barbara, transferred from the First Reserve Hospital, Manila, to the Military Hospital, Vigan, Philippine Islands.

Young, Agnes G., relieved from duty at the Post Hospital, United States Legation Guard, Peking, China, and ordered to duty at the Santa Mesa Hospital, Manila, Philippine Islands.

Zink, Josephine, recently arrived in Manila and assigned to duty at the Santa Mesa Hospital.

THE CURRICULUM OF HOSPITAL-CORPS MEN

HOSPITAL CORPS COMPANY OF INSTRUCTION, DIVISION OF THE
PHILIPPINES, MANILA, 1900-01

Hour.	Monday.	Tuesday.	Wednesday.	Thursday.	Friday.	Saturday.
A. M.						
6.05—6.30	Drill.	Drill.	Drill.	Drill.	Drill.	
9.05—10.00	Signal Drill.	Bandaging. (Van Sickle.)	Field work.	Splinting. (Keeney.)	Signal Drill.	
10.00—11.00	Hygiene. (Lyster.)	Anatomy and Physiology. (Brooks.)	First Aid. (Millhoff.)	Regulations and Discipline. (Hartford.)	Nursing. (Kulp.)	Inspection.
11.00—12.00	Clinical Surgery. (Saleeby.)				Clinical Surgery. (Saleeby.)	
P. M.						
2.00—3.00	Study Hour.	Study Hour.	Study Hour.	Study Hour.	Study Hour.	
3.00—4.00	Clerical work. (Armstrong.)	Litter Drill.	Minor Surgery. (Poey.)	Pharmacy. (Saleeby.)	Litter Drill.	

While receiving practical instruction in Wards men will attend all lectures.

While receiving practical instruction in Cooking men will attend afternoon lectures.

While receiving practical instruction in Diet-Cooking men will attend all lectures.



THE EDITOR



EVERY woman who has had the experience of assuming the duties of the superintendent of a hospital will, I think, bear me out in the statement that the most difficult problem she has had to confront in the beginning has been that of the buying of hospital supplies.

One of her most sacred duties is the spending of money which has been contributed by individuals, in larger or smaller amounts, for the support of the hospital, yet nothing in her previous training or in her experience as a private nurse has in any way prepared her for this responsibility, which meets her almost upon her entrance to the hospital and never leaves her while she holds the position.

In the matter of ordinary household groceries there is little to be said, as the local markets must necessarily be depended upon, and more than to suggest that all non-perishable supplies should be purchased in wholesale quantities and from a wholesale dealer, we pass on to hospital furnishings and medical and surgical supplies and instruments.

All manufacturers of hospital furniture in enamelled iron and glass ware will sell direct to institutions even in small quantities, and the discount which these firms make to charitable institutions makes buying direct cheaper, even after freight is paid.

The illustrated catalogues which are issued by such manufacturers make a selection easy, and samples will always be sent on approval before the final order is given.

This same principle holds good in the purchase of absorbent cotton, gauze, gauze bandages, catheters, rubber and glass, urinals, bedpans, etc., and all the smaller glass instruments, such as douche and irrigating tips, syringes of different kinds, and the quantities of small instruments and apparatus which must be constantly kept in stock, and which can be bought to vastly greater advantage in quantities. In the purchasing of drugs and surgical instruments,—and by drugs we include everything that is kept in the hospital pharmacy,—more money can be saved to the hospital by judicious buying than in any other department. All hospitals are entitled to exemption from the government tax of two dollars per gallon on alcohol. Any distilling-house will supply the blanks and information necessary to obtain this discount, and while the “red tape” at the outset is somewhat formidable, the actual money saved in the price of a barrel of alcohol more than compensates for the trouble.

Tablets of all kinds can be ordered from wholesale houses at a much better price than can be obtained in small quantities from a local dealer.

Where prescriptions, tinctures, etc., are prepared in the hospital pharmacy there is a long list of stock preparations which may be bought in quantity and under proper conditions will keep indefinitely.

When a mixed order amounting to several hundred dollars is to be placed, we have found it a satisfactory method to ask for bids on the order from three or four equally reliable manufacturing druggists in different cities.

In the matter of gauze and cotton there is perhaps a greater competition in price and quality than in any other two articles used in the hospital. The large dealers in all such staple supplies send their agents at regular intervals to the hospitals, and it is one of the superintendent's important duties to interview these men, see their goods, compare their prices, and to be able to discriminate in regard to the quality of all these different lines of supplies. Hundreds of dollars may be saved by careful attention to the manner of purchasing, and it is a vastly better business principle to save this money by careful management than to buy recklessly of local dealers and then be obliged to beg the money from private citizens to make up for the extravagance.

It has been our endeavor since *THE AMERICAN JOURNAL OF NURSING* came into existence to make its advertising pages helpful to the inexperienced superintendent. We have permitted only such firms as we have known personally or have had reason to believe were reliable to use our advertising pages, and while our list is still far from complete, we shall continue to follow this policy.

Every superintendent should investigate carefully for herself the standing and character of the firms with which she proposes to have dealings. She should have a clear understanding in regard to terms of payment. Every order should be given in writing and a copy retained for reference.

After some years of experience she becomes familiar with the most reliable houses, she knows personally their representatives, she gives her orders with confidence, and the once vexed question of hospital purchasing comes down to a matter of routine. Many a good nurse may fail as a hospital superintendent because of her lack of a few simple business principles in the beginning, and while she is gaining this experience the hospital becomes badly in debt. We think the women who have worked out the buying problem should give freely of their knowledge to the younger generation, and our pages are always open for suggestions on these lines.

S. F. P.

THE Editor-in-Chief writes that she is having a refreshing vacation, and will resume her full work on the magazine with the September issue. Miss Palmer's address is No. 476 West Avenue, Rochester.

The September number of THE AMERICAN JOURNAL OF NURSING will be a Congress number. It is proposed to give biographies of our foreign delegates, with their photographs, and short biographies of our home delegates with a few typical photographs, and short historical sketches of the different associations represented at the Congress. It is believed that this collection of reports will be of much value in the future as reference matter besides being of interest now, as it will show the entire growth and development of our organizations and will present between two covers information which is now scattered all over the country and can be procured only with much difficulty.

The reports which are coming in are very satisfactory, and we urge all secretaries to realize the importance of making this little piece of current history as full and complete as possible. The September number will appear later than usual.

WE hear that two State associations are in process of formation, Virginia and Illinois.

Their proceedings are probably not sufficiently advanced to permit reports for the magazine. We wish them all success, and hope for full accounts later.

THE commencement season just past has brought word to the Editor of many nurses started on their careers with words of encouragement and approbation from their teachers and lecturers.

Some curious inconsistencies and contradictions have come to notice in the accounts of these functions.

THE AMERICAN JOURNAL OF NURSING thinks it not untimely to draw attention to the contrast between the exercises held, let us say, at the Cleveland Lakeside Hospital Commencement and those of the Philadelphia Nurse Supply, "Short Course in Nursing"—or not so much the exercises themselves as what they signify. In the former, a three-years' course, carefully graded, with practical and theoretical work harmoniously combined, and a full variety of every kind of nursing service provided for the instruction of the pupil. So much care and pains are taken, that pupils are even sent to New York for the study of obstetrics. The doctors in this hospital fully coöperate in the teaching of the pupil according to the highest standard (we are taking this hospital, let us repeat, only as a type), and no doubt will always warmly support the ideal of a broad and full general training of three years,—not too long a time for the fixing of orderly habit, accuracy, and the development of character.

In the latter, a ten-weeks' course; no practical work, unless the pupils choose at their own option to "visit and nurse the poor" (oh, long-suffering poor!); only a course of lectures, for which the pupil pays twenty-five dollars fee; no training in orderliness, system, carefulness in household matters; the pupils live where and how they please. This course, little, if anything, more than a set of lectures on emergencies and first aid, had this spring fifteen graduates.

The strange part of the contrast comes in here, that also on this platform stand members of the medical profession (presumably in good standing) upholding this quack—this bogus—method of teaching nurses (or rather of deceiving pupils and public), and lauding the graduates and holding out to them rosy promises of the success they will be enabled to achieve.

One is not surprised to find on the list of members of this corporation a number of clergy and philanthropists. They are not expected to have the technical knowledge which would enable them to discriminate, and they may fairly be excused on the ground of ignorance of what nursing ought to be; but our chiefs ought to know by this time, and it is hard to explain the fact, that the sham training-schools and the training-schools run for financial profit in private sanitariums are all managed by doctors. We must wonder why they do not extend to us those ethics which they practise with one another, and which they impress upon us we must practise with them. We must wonder too if they do not all remember their own early history and struggles against bogus colleges of medicine. We believe that many are unconscious of what they are really doing, and would be responsive to appeals to their better selves. It is certain that, as the result of the representations of one courageous and public-spirited nurse of Philadelphia, several such men withdrew from their connection with the "Nurse Supply" and disclaimed any wish to injure or offend the nursing profession. We believe that the method of expostulation and reasoning would be finally effectual with all, and that nurses themselves are to blame if they allow such abuses to continue.

We fully believe that none of our chiefs will refuse to be moved by the protestations of *united* nurses if these be made in a fair and dignified spirit, and the close union of all our forces, with steady support of our highest educational standards, and open and direct criticism and protest against quackery in nursing, will finally result in removing all medical men from the staffs of such institutions.

Some nurses also need this education, or how could one be found willing to give this so-called demonstrative teaching in nursing? And, finally, the next work of our Associated Alumnae should be the classification of desirable schools of nursing for the guidance and help of the uninformed applicant.

THE Congress Committee has received an official notification from the Surgeon-General's Office that orders would be requested at the proper time directing the assignment of a representative of the Army Nurse Corps as a delegate to the Congress.

Nurses all over the country will surely feel pleasure and gratification in this honor paid to their profession by the Surgeon-General. This, following the recognition of the nurse's work as an expert specialty in the appointment of a trained nurse as head of the Army Corps, should make each one feel an added zeal and determination to win the continued respect and confidence of the War Department, not only by her skill as a nurse, but also by her bearing as a woman.

QUITE a new departure has been followed this spring in the graduating exercises of one or two of our training-schools in the administration of a somewhat modified form of the Hippocratic oath to the graduates in nursing.

Some unfavorable criticism has been excited by this proceeding, yet we can hardly see why. The provisions of the oath, as given in "Training-School and Hospital Items," only call for the discretion and loyalty which every nurse promises in her contract with the school when she enters it, but which she too often forgets to practise continually in her daily life.

Perhaps it is true that making this pledge will not secure her continual remembrance of her duty and will only commit her to another broken promise, but certainly in the case of the medical profession a far greater degree of discretion, reticence, and silence as to the patients' affairs prevails generally than is the case among nurses.

Whether this is due to their oath or not cannot, of course, be asserted positively; it may be only that the nurses have less of general interest in their lives, or that the woman's tongue is a more unruly member.

In a certain large city there is a car-line on a street much inhabited by nurses, and travellers on this line are daily compelled, whether interested or not, to listen to all kinds of intimate personal details related by nurses going to and fro from "hours off" with private cases about their patients,—details often quite inadmissible, not only as regards professional treatment, but as regards personal peculiarities and failings of the family and friends.

If the taking of a Hippocratic oath could check this deplorable tendency, surely its provisions could not be too strong, or its threats of dire consequences too curse-like.

